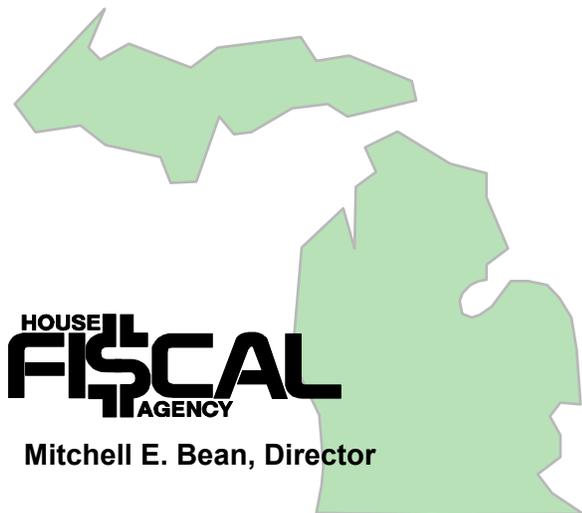


# LINE ITEM AND BOILERPLATE SUMMARY

## COMMUNITY HEALTH

Fiscal Year 2007-08  
Public Act 123 of 2007  
House Bill 4344

As Enacted



Prepared and Compiled by:

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February 2008

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February 2008

TO: Members of the Michigan House of Representatives

The House Fiscal Agency has prepared a **Line Item Summary** for each of the FY 2007-08 appropriation acts. Each **Summary** contains line-by-line appropriation and revenue source detail, and a brief explanation of each boilerplate section in the appropriation bill.

In this report, line item vetoes are presented in the following manner: appropriation amounts shown in ~~strikeout~~ are those that appear in the enrolled bill; amounts shown directly below ~~strikeout~~ amounts reflect the effect of the veto.

Line Item Summaries are available on the HFA website ([www.house.mi.gov/hfa](http://www.house.mi.gov/hfa)), or from Jeanne Dee, Administrative Assistant (373-8080 or [jdee@house.mi.gov](mailto:jdee@house.mi.gov)).

A handwritten signature in black ink that reads "Mitchell E. Bean".

Mitchell E. Bean, Director



## TABLE OF CONTENTS

DEPARTMENT OF COMMUNITY HEALTH .....	1
Departmentwide Administration .....	3
Mental Health/Substance Abuse Services Administration and Special Projects .....	5
Community Mental Health/Substance Abuse Services Programs .....	8
State Psychiatric Hospitals, Centers for Persons with Developmental Disabilities, and Forensic and Prison Mental Health Services .....	11
Public Health Administration .....	14
Health Policy, Regulation, and Professions .....	16
Infectious Disease Control .....	19
Laboratory Services .....	21
Epidemiology .....	22
Local Health Administration and Grants .....	24
Chronic Disease and Injury Prevention and Health Promotion .....	25
Family, Maternal, and Children’s Health Services .....	28
Women, Infants, and Children Food and Nutrition Program .....	31
Children's Special Health Care Services .....	32
Office of Drug Control Policy .....	34
Crime Victim Services Commission .....	35
Office of Services to the Aging .....	36
Michigan First Healthcare Plan .....	39
Medical Services Administration .....	40
Medical Services .....	41
Information Technology .....	46
BOILERPLATE SECTION INFORMATION .....	47



# GLOSSARY

## STATE BUDGET TERMS

**Gross Appropriations (Gross):** The total of all applicable appropriations (statutory spending authorizations) in a budget bill.

**Adjusted Gross Appropriations (Adjusted Gross):** The net amount of all gross appropriations after subtracting interdepartmental grants (IDGs) and intradepartmental transfers (IDTs).

**Lapses:** Appropriation amounts that are unspent/unobligated at the end of a fiscal year. Appropriations are automatically terminated at the end of a fiscal year unless otherwise provided by law.

**Work Project:** A statutorily-authorized account which allows a spending authorization to be carried over from one fiscal year to a succeeding fiscal year or years—i.e., allows funds to be spent over a period of years.

## APPROPRIATION BILL TERMS

**Line Item:** Specific funding amount in an appropriation bill which establishes spending authorization for a particular program or function (may be for a single purpose or for multiple purposes).

**Boilerplate:** Specific language sections in an appropriation bill which direct, limit or restrict line item expenditures, express legislative intent, and/or require reports.

## REVENUE SOURCES

**General Fund/General Purpose (GF/GP):** Unrestricted General Fund revenue available to fund any activity accounted for in the General Fund; unused GF/GP revenue lapses to the General Fund at the end of a fiscal year.

**State Restricted (Restricted):** State revenue restricted by state law or outside restriction that is available only for specified purposes; at year-end, unused restricted revenue remains in the restricted fund.

**Federal Revenue:** Federal grant or matchable revenue dedicated to specific programs.

**Local Revenue:** Revenue from local units of government.

**Private Revenue:** Revenue from non-government entities: rents, royalties or interest payments, payments from hospitals or individuals, and gifts and bequests.

**Interdepartmental Grant (IDG):** Revenue or funds received by one state department from another state department (usually for a service provided by the receiving department).

**Intradepartmental Transfer (IDT):** Transfers or funds being provided from one appropriation unit to another in the same department.

## MAJOR STATE FUNDS

**Budget Stabilization Fund (BSF):** The countercyclical economic and budget stabilization fund; also known as the "rainy day" fund.

**School Aid Fund (SAF):** A restricted fund; the primary funding source for K-12 schools and Intermediate School Districts (ISDs).

**General Fund:** The General Fund (funded from taxes and other general revenue) is used to account for the ordinary operations of a governmental unit that are not accounted for in another fund.



## DEPARTMENT OF COMMUNITY HEALTH

*The Department of Community Health (DCH) is responsible for the development of health policy and the management of Michigan's publicly-funded health care systems. The Department, established by Executive Order in 1996, consolidated the former Departments of Mental Health and Public Health with Medicaid and the Office of Drug Control Policy. In 1997, the Adult Home Help Program, and the Social Services to the Physically Disabled Program were brought into DCH from the former Family Independence Agency (now Department of Human Services). The Office of Services to the Aging and the Crime Victim Services Commission were transferred from the Department of Management and Budget to DCH in 1997. The Bureaus of Health Services and Health Systems were transferred from the former Consumer and Industry Services (Labor and Economic Growth) in 2003.*

*The Department's mission for the public mental health system is to serve citizens by diminishing the impact and incidence of developmental disability, emotional disturbance, and mental illness.*

*With respect to substance abuse treatment and prevention activities, the Department's mission is to promote the health and welfare of individuals through the reduction of substance abuse, and to participate in efforts to address its social, personal, and economic consequences.*

*The mission of the Public Health Administration is to protect and promote the public health. The Department's commitment is to prevent and control infectious and chronic disease, injury, and environmental health hazards, and to reduce and eliminate health disparities in vulnerable populations.*

*The Bureaus of Health Systems and Health Professions seek to protect and improve the health, safety, and welfare of Michigan's citizens through development and maintenance of safe and accessible health care services through health care facilities, development of appropriate regulatory practices, and implementation and enforcement of laws involving licensing and regulation of health professionals.*

*The Department's Medical Services unit provides health care coverage for low income persons throughout the state who meet the eligibility requirements for Medicaid, MICHild, Elder Prescription Insurance Coverage, and indigent care programs.*

*The mission of the Office of Drug Control Policy is to reduce the abuse of alcohol, drugs, and other substances and related criminal activity and violence through collaborative prevention, education, treatment, and law enforcement programs and grants.*

*The mission of the Office of Services to the Aging is to promote independence and enhance the dignity of Michigan's older persons and their families through supportive programs, services, policies and advocacy.*

*The Crime Victim Services Commission's mission is to protect and enhance the health, safety, dignity and rights of victims of crime through programs and grants for services, support and victim compensation.*

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service
Full-time equated classified positions	4,761.6	Full-time equated (FTE) positions in the state classified service
Average population	1,109.0	Average number of patients at four state-operated psychiatric hospitals, one center for persons with developmental disabilities and severe mental illness, and the Forensic Center
<b>GROSS APPROPRIATION \$12,048,326,100 Total of all applicable line item appropriations</b>		
Total interdepartmental grants/intradepartmental transfers	39,410,200	Total of all funds received from other departments and transfer of funds

<b>ADJUSTED GROSS APPROPRIATION</b>	<b>\$12,008,915,900</b>	<b>Total net amount of all line item gross appropriations less (or minus) interdepartmental grants (IDGs) and intradepartmental transfers (IDTs)</b>
Total federal revenue	6,708,510,700	Total federal grant or matchable revenue
Total local revenue	247,237,400	Total revenue from local units of government
Total private revenue	65,519,800	Total private grant revenue
Merit Award Trust Fund	144,000,000	Total Merit Award Trust Fund revenue from the 1998 master settlement agreement with tobacco companies
Total state restricted revenue	1,718,336,400	State revenue dedicated to a specific fund (other than the General Fund); or revenue earmarked for a specific purpose
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$3,125,311,600</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 102: DEPARTMENTWIDE ADMINISTRATION

*This appropriation unit contains funding for the centralized administrative functions of DCH and the Developmental Disabilities Council.*

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service		
Full-time equated classified positions	226.5	Full-time equated (FTE) positions in the state classified service		
Director and other unclassified – 6.0 FTE positions	\$598,600	Salaries of Director and five other unclassified positions; does not include fringe benefits	Funding Source(s):	GF/GP 598,600
			<i>Related Boilerplate Section(s): None</i>	
Departmental administration and management – 198.0 FTE positions	23,881,600	Funds administrative staff carrying out powers and duties of DCH which include FTEs in Bureau of Budget and Audit, Bureau of Finance, Bureau of Human Resources, Communications, Training and Performance Support Division, and Office Services and Space/Property Management Division; funds miscellaneous contracts and fringe benefits for unclassified positions	Funding Source(s):	Federal 7,057,700 Restricted 2,591,200 GF/GP 14,232,700
			<i>Related Boilerplate Section(s): None</i>	
Office of long-term care supports and services – 18.5 FTE positions	2,713,800	New line item to reflect office charged with the following: administer activities to implement Michigan's Long-Term Care Task Force recommendations; coordinate state planning for long-term care supports and services; and conduct quality assurance reviews of publicly funded long-term care programs	Funding Source(s):	Federal 2,131,200 Private 40,100 GF/GP 542,500
			<i>Related Boilerplate Section(s): None</i>	
Worker's compensation program	8,825,000	Central funding source for worker's compensation claims against DCH; funds wage/salary and related fringe benefits for employees who return to work under limited duty assignments	Funding Source(s):	Restricted 16,000 GF/GP 8,809,000
			<i>Related Boilerplate Section(s): 301</i>	
Human resources optimization user charges	285,500	Reflects work done by the Human Resources Call Center within the Department of Civil Service on behalf of employees of DCH	Funding Source(s):	GF/GP 285,500
			<i>Related Boilerplate Section(s): None</i>	
Rent and building occupancy	10,043,300	Payments for rental space in privately-owned buildings statewide (includes buildings formerly under jurisdiction of Department of Public Health, the Chandler Building, and Capitol View Building); payments to DMB for rent, security, and operating costs of state-owned buildings	Funding Source(s):	Federal 2,122,800 Private 35,900 Restricted 893,700 GF/GP 6,990,900
			<i>Related Boilerplate Section(s): None</i>	

Developmental disabilities council and projects – 10.0 FTE positions	2,772,000	21- member Council recreated within DCH pursuant to EO 2006-12 and required by federal law; funded with federal funds and 25% match at local level; Council charged with advocating/conducting projects on behalf of persons with developmental disabilities, and developing/implementing the State Developmental Disabilities Plan
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Funding Source(s): Federal 2,772,000

*Related Boilerplate Section(s): None*

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**GROSS APPROPRIATION \$49,120,000 Total of all applicable line item appropriations**

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Total federal revenue	14,083,900	Includes Title XIX Medicaid, Title XXI Children's Health Insurance Program funds, random moment sampling cost revenue, substance abuse block grant, developmental disability grant, immunization grant, mental health systems transformation grant, aging and disability resource center grant, money follows the person grant, independence plus initiative grant, long-term care transformation grant, Medicaid infrastructure grant, and Women, Infants, and Children (WIC) revenue
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Total private revenue	76,000	Parking fees and Robert Woods Johnson cash and counseling grant
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Total state restricted revenue	3,500,900	Includes Michigan Health Initiative Fund revenue, newborn screening fees, Health Professional Regulatory Fund revenue, health system fees and collections, and certificate of need (CON) fees
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**GENERAL FUND/  
GENERAL PURPOSE \$31,459,200 The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue**

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## SECTION 103: MENTAL HEALTH/SUBSTANCE ABUSE SERVICES ADMINISTRATION AND SPECIAL PROJECTS

*This appropriation unit contains funding for administration of mental health and substance abuse services and several mental health and substance abuse programs. Also funds Protection and Advocacy Services, an agency designated by the Governor which is independent of the public mental health system.*

Full-time equated classified positions	111.0	Full-time equated (FTE) positions in the state classified service
Mental health/substance abuse program administration – 110.0 FTE positions	\$13,409,500	<p>Funds staff administering mental health/substance abuse programs for DCH; finance mental health/substance abuse program administration contracts; finance study encouraging administrative efficiencies among local public health departments, CMHSPs, substance abuse coordinating agencies, and area agencies on aging; private funds to evaluate Assertive Community Treatment (ACT) services/outcomes for persons with serious mental illness and assess relationship of ACT program practices to consumer outcomes; federal funds promote community-based systems of care and substance abuse data development, assist state in preventing/reducing underage drinking, strengthen the substance abuse delivery system, and coordination of mental health, public health, and children's special health care services</p> <p style="text-align: right;">Funding Source(s):    Federal    3,121,000    Private    190,000    GF/GP    10,098,500</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): 272</i></p>
Consumer involvement program	189,100	<p>Assist consumer participation/leadership in DCH policy/planning forums; assist consumer self-help groups through Justice in Mental Health Organization, phone hotline, and National Schizophrenics Foundation</p> <p style="text-align: right;">Funding Source(s):    GF/GP    189,100</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>
Gambling addiction – 1.0 FTE position	3,500,000	<p>Education/prevention/research/treatment services related to pathological gambling addictions; toll-free compulsive gambler help-line number; funds FTE who is liaison to Lottery Bureau and develops policies for treatment of persons with gambling addictions</p> <p style="text-align: right;">Funding Source(s): Restricted    3,500,000</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>
Protection and advocacy services support	777,400	<p>Agency, designated by the Governor, with authority to pursue legal, administrative, and other appropriate remedies to protect rights of persons with mental illness and developmental disabilities, and investigate allegations of abuse or neglect of persons with mental illness and developmental disabilities</p> <p style="text-align: right;">Funding Source(s):    GF/GP    777,400</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): 350</i></p>
Mental health initiatives for older persons	1,291,200	<p>Program provides respite and day care services/training to home health care providers/caregivers in the nature/progression of Alzheimer's disease and related disorders; federal grant promotes a collaborative approach on developing community models of support for persons with Alzheimer's disease</p> <p style="text-align: right;">Funding Source(s):    Federal    242,000    GF/GP    1,049,200</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>

Community residential and support services	2,713,000	Primarily used to finance community residential leases under responsibility of DCH; expired lease arrangements are transferred to the financial responsibility of CMHSPs	Funding Source(s):	Federal	400,000
				GF/GP	2,313,000
<i>Related Boilerplate Section(s): None</i>					
Highway safety projects	400,000	Combined with funds from Department of State Police/Office of Highway Safety Planning to develop/distribute pamphlets, brochures, videos, and public service announcements promoting substance abuse prevention and highway safety	Funding Source(s):	Federal	400,000
<i>Related Boilerplate Section(s): None</i>					
Federal and other special projects	3,277,200	Grant to improve the quality and availability of child development services and support mental health and public health consultation services to child care providers, grant to improve access to health and other services for individuals with traumatic brain injuries (injury control intervention project line are matching funds for grant), grant to provide training to mental health professionals, consumers, and their families to increase the capacity of CMHSPs to provide quality services, and grant to develop and implement an integrated approach to parent leadership on human services policies	Funding Source(s):	Federal	3,277,200
<i>Related Boilerplate Section(s): None</i>					
Family support subsidy	19,036,000	Provide monthly payment of \$222.11 to over 6,700 income-eligible families with a child under age 18 living at home who is severely mentally impaired, severely multiply impaired, or autistic	Funding Source(s):	Federal	19,036,000
<i>Related Boilerplate Section(s): None</i>					
Housing and support services	9,306,800	Costs and contracts for housing/rental assistance programs for persons with mental illness or disabilities who are homeless or at risk of homelessness, and housing assistance for persons living with AIDS; grant supports contracts for housing assistance to homeless persons who have co-existing disorders of a qualifying mental health disability and substance abuse	Funding Source(s):	Federal	8,601,200
				GF/GP	705,600
<i>Related Boilerplate Section(s): None</i>					
Methamphetamine cleanup fund	100,000	Administrative costs of local governments up to \$800 per property for their methamphetamine cleanup efforts	Funding Source(s):	GF/GP	100,000
<i>Related Boilerplate Section(s): 351</i>					
<b>GROSS APPROPRIATION</b>	<b>\$54,000,200</b>	<b>Total of all applicable line item appropriations</b>			
Total federal revenue	35,077,400	Includes oil/gas royalties, Title XIX Medicaid, substance abuse block grant, federal Department of Transportation safety highway funds, projects in assistance for transition from homelessness (PATH), temporary assistance to needy families (TANF), and the following grants: housing opportunities for persons with AIDS (HOPWA), alzheimer's disease, state mental health infrastructure, synectics annual award, federal Department of Education Early On, shelter plus care, Supportive Housing Program (SHP-PATH), strategic prevention framework, traumatic brain injury, mental health systems transformation, parent leadership initiative, and child care development fund expulsion prevention			
Total private revenue	190,000	Private funds from the Flinn Family Foundation			

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Total state restricted revenue	3,500,000	Includes lottery funds, horse racing revenue, and casino licensing fees
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$15,232,800</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

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## SECTION 104: COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS

*This appropriation unit contains funding for 46 community mental health services programs (CMHSPs) which have been established pursuant to the Mental Health Code to provide services and supports for persons who have a serious mental illness, developmental disability, or serious emotional disturbance. The unit also includes funding for 18 prepaid inpatient health plans (PIHPs) established pursuant to the Mental Health Code and federal waiver provisions, respite services, multicultural services, federal mental health block grant, children's waiver home care program, omnibus reconciliation act implementation, civil service charges, and for coordinating agencies for a continuum of substance abuse prevention, education, and treatment programs.*

Full-time equated classified positions	9.5	Full-time equated (FTE) positions in the state classified service								
Medicaid mental health services	\$1,717,929,300	<p>Medicaid managed care capitated funds for CMHSPs/PIHPs serving state residents; mental health services provided by CMHSP or PIHP, or contract with public or private agencies</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">998,117,000</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">102,980,500</td> </tr> <tr> <td>Local</td> <td style="text-align: right;">26,072,100</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">590,759,700</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 271, 401, 402, 404, 405, 418, 428, 442, 452, 456, 460, 470, 480</i></p>	Federal	998,117,000	Restricted	102,980,500	Local	26,072,100	GF/GP	590,759,700
Federal	998,117,000									
Restricted	102,980,500									
Local	26,072,100									
GF/GP	590,759,700									
Community mental health non-Medicaid services	319,566,100	<p>Non-Medicaid funds to CMHSPs or PIHPs serving residents of the state's 83 counties; mental health services provided directly by CMHSP or PIHP, or by contract with public or private agencies</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">GF/GP</td> <td style="text-align: right;">319,566,100</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 401, 402, 404, 405, 428, 442, 452, 456, 460, 462, 470, 476</i></p>	GF/GP	319,566,100						
GF/GP	319,566,100									
Medicaid adult benefits waiver	40,000,000	<p>Funds to CMHSPs or PIHPs to provide mental health benefits to persons not previously Medicaid eligible until approval of a federal waiver on January 16, 2004</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">28,268,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">11,732,000</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 442, 452</i></p>	Federal	28,268,000	GF/GP	11,732,000				
Federal	28,268,000									
GF/GP	11,732,000									
Multicultural services	5,763,800	<p>Funds to CMHSPs to contract with providers that serve multicultural populations such as Chinese American, Asian American, Hispanics, and Arab/Chaldean; and funds to Michigan Inter-Tribal Council, Jewish Federation, Chaldean Chamber Foundation, and Vietnam Veterans</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">GF/GP</td> <td style="text-align: right;">5,763,800</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 403</i></p>	GF/GP	5,763,800						
GF/GP	5,763,800									
Medicaid substance abuse services	36,378,500	<p>Capitated funds for Medicaid substance abuse services managed by selected PIHPs pursuant to federal Health Care Financing Administration approval of Michigan's 1915(b) waiver request; PIHPs that are not coordinating agencies for substance abuse services may contract with coordinating agencies for services</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">21,135,900</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">2,000,800</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">13,241,800</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 402, 404, 409, 410, 414, 418, 423, 428, 470</i></p>	Federal	21,135,900	Restricted	2,000,800	GF/GP	13,241,800		
Federal	21,135,900									
Restricted	2,000,800									
GF/GP	13,241,800									

Respite services	1,000,000	Supports contracts with CMHSPs or PIHPs for respite care services primarily for children with serious emotional disturbance and their families; care provided in and out of home in residential facilities Funding Source(s): GF/GP 1,000,000 <i>Related Boilerplate Section(s): 465</i>
CMHSP, purchase of state services contracts	136,239,300	Used by CMHSPs or PIHPs to purchase state services for clients in their catchment areas or develop their own community alternatives to utilization of state hospitals/centers Funding Source(s): GF/GP 136,239,300 <i>Related Boilerplate Section(s): None</i>
Civil service charges	1,499,300	Pays 1% civil service charges authorized by State Constitution Funding Source(s): GF/GP 1,499,300 <i>Related Boilerplate Section(s): 204</i>
Federal mental health block grant – 2.5 FTE positions	15,367,900	Funds available to primarily CMHSPs or PIHPs for community-based services for adults with serious mental illness and children with serious emotional disturbances such as wraparound services, adult dual diagnosis programs, psychosocial rehabilitation programs, and assertive community treatment teams; funds FTEs, contractual services, supplies, travel, and other costs related to administering the federal block grant Funding Source(s): Federal 15,367,900 <i>Related Boilerplate Section(s): None</i>
State disability assistance program substance abuse services	2,509,800	Per diem room and board payments for needy persons 18 years of age or older, or emancipated minors who reside in substance abuse residential facilities Funding Source(s): GF/GP 2,509,800 <i>Related Boilerplate Section(s): 272, 282, 406, 408, 409, 410, 423, 463, 470</i>
Community substance abuse prevention, education, and treatment programs	85,268,000	Primarily distributed to 16 coordinating agencies for substance abuse services and authorized for services to chemically dependent pregnant women and injecting drug users, and children's access to tobacco; funds Salvation Army Harbor Light program; federal funds authorized to assist state in preventing/reducing underage drinking and the progression of substance abuse; federal block grants used to educate and counsel persons on abuse of substances Funding Source(s): Federal 66,077,500 Restricted 1,784,200 GF/GP 17,406,300 <i>Related Boilerplate Section(s): 272, 282, 407, 408, 409, 410, 412, 423, 463, 464, 467, 468, 470, 477</i>
Children's waiver home care program	19,549,800	Home and community-based services for over 400 eligible children with developmental disabilities who reside at home and who may otherwise require institutional care Funding Source(s): Federal 11,358,400 GF/GP 8,191,400 <i>Related Boilerplate Section(s): None</i>

Omnibus reconciliation act implementation – 7.0 FTE positions	12,367,200	Staff, supplies, related costs, and contracts for implementing federal mandate addressing inappropriate placement in nursing homes of persons who are mentally ill or developmental disabled (includes pre-admission screening, assessment of needs for individuals in nursing homes and for active treatment, and alternative services for persons found to be inappropriately placed); funds contract with Birchwood nursing home, Great Lakes CMH, and out-of-state nursing homes to provide specialized care to older adults who require nursing care and mental health services
		Funding Source(s): Federal 9,416,700 GF/GP 2,950,500
		<i>Related Boilerplate Section(s): None</i>
Children with serious emotional disturbances waiver	570,000	Implement federally-approved waiver that expands Medicaid coverage to 43 children with serious emotional disturbances and/or chronically mentally ill; GF/GP match provided by CMHSPs
		Funding Source(s): Federal 570,000
		<i>Related Boilerplate Section(s): None</i>
<b>GROSS APPROPRIATION</b>	<b>\$2,394,009,000</b>	<b>Total of all applicable line item appropriations</b>
Total federal revenue	1,150,311,400	Includes Title XIX Medicaid, Title XXI State's Children Health Insurance Program funds, mental health block grant, substance abuse block grant, strategic prevention framework grant, and prevention of methamphetamine abuse grant
Total local revenue	26,072,100	Received from CMHSPs or PIHPs
Total state restricted revenue	106,765,500	Includes substance abuse licensing fees and fines, and quality assurance assessment program (QAAP) revenue
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$1,110,860,000</b>	<b>The state's primary operating fund; the portion of the State's General Fund that does not include restricted revenue</b>

**SECTION 105: STATE PSYCHIATRIC HOSPITALS,  
CENTERS FOR PERSONS WITH DEVELOPMENTAL DISABILITIES,  
AND FORENSIC AND PRISON MENTAL HEALTH SERVICES**

*This appropriation unit contains funding for: three state-operated psychiatric hospitals for adults with mental illness; one state-operated psychiatric hospital for children and adolescents with mental illness; one state-operated center for persons with developmental disabilities and severe mental illness; the Forensic Center created pursuant to the state's Mental Health Code; and prisoner mental health services in which DCH assumes responsibility for mental health treatment services for prisoners under the jurisdiction of the Department of Corrections (DOC). This appropriation unit also finances costs associated with operation of state hospitals and centers such as purchase of medical services for residents of hospitals and centers, special maintenance and equipment, and closed facilities. Funding for federal and private projects is also included in this appropriation unit.*

Total average population	1,109.0	Average number of patients at state-operated psychiatric hospitals for adults, children, and adolescents with mental illness, a state center for persons with developmental disabilities and severe mental illness, and the Forensic Center
Total full-time equated classified positions	2,957.3	Full-time equated (FTE) positions in the state classified service
Caro regional mental health center-psychiatric hospital – adult – 481.3 FTE positions <i>179.0 average population</i>	\$43,466,600	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel/other costs for state-operated psychiatric hospital in Caro, Michigan, for adults with mental illness Funding Source(s): Federal 1,968,000 Local 3,253,000 CMHSP 35,124,200 Restricted 3,121,400  <i>Related Boilerplate Section(s): 604, 605, 606, 607, 608</i>
Kalamazoo psychiatric hospital – adult – 466.6 FTE positions <i>186.0 average population</i>	43,120,900	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel/other costs for state-operated psychiatric hospital in Kalamazoo, Michigan, for adults with mental illness Funding Source(s): Federal 1,556,000 Local 3,521,000 CMHSP 33,612,300 Restricted 4,431,600  <i>Related Boilerplate Section(s): 604, 605, 606, 607, 608</i>
Walter P. Reuther psychiatric hospital – adult – 437.3 FTE positions <i>236.0 average population</i>	43,147,800	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel/other costs for state-operated psychiatric hospital in Westland, Michigan, for adults with mental illness Funding Source(s): Federal 2,375,800 Local 3,081,500 CMHSP 36,223,300 Restricted 1,467,200  <i>Related Boilerplate Section(s): 604, 605, 606, 607, 608</i>
Hawthorn center – psychiatric hospital – children and adolescents – 218.0 FTE positions <i>74.0 average population</i>	21,497,600	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel/other costs for state-operated psychiatric hospital in Northville, Michigan, for children/adolescents with mental illness Funding Source(s): Federal 14,131,300 Local 630,500 CMHSP 6,595,300 Restricted 140,500  <i>Related Boilerplate Section(s): 604, 605, 606, 607, 608</i>

Mount Pleasant center – developmental disabilities – 472.7 FTE positions 209.0 average population	46,936,300	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel/other costs for state-operated center in Mt. Pleasant, Michigan, for persons with developmental disabilities and severe mental illness transferred from other state psychiatric hospitals Funding Source(s): Federal 18,988,700 Local 2,400,900 CMHSP 24,684,200 Restricted 862,500  <i>Related Boilerplate Section(s): 604, 605, 606, 607, 608</i>
Center for forensic psychiatry – 565.0 FTE positions 225.0 average population	60,695,900	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel/other costs for the Forensic Center in Ann Arbor, Michigan, which provides psychiatric treatment for criminal defendants ruled incompetent to stand trial and/or acquitted by reason of insanity, specialized mental health services for transferred prisoners, diagnostic services to the criminal justice system, and examinations conducted by multi-disciplinary teams on an outpatient basis at the Center and other sites Funding Source(s): Federal 6,100 Local 4,207,500 Restricted 787,000 GF/GP 55,695,300  <i>Related Boilerplate Section(s): 604, 605, 606, 607, 608</i>
Forensic mental health services provided to the department of corrections – 316.4 FTE positions	38,108,200	Through interdepartmental agreement, DCH assumes responsibility for providing mental health services to prisoners under jurisdiction of DOC; DOC is responsible for custodial/ administrative functions for Huron Valley Correctional Complex in Ypsilanti, Michigan Funding Source(s): IDG 38,108,200  <i>Related Boilerplate Section(s): 603</i>
Revenue recapture	750,000	Project generates revenue (from third parties related to closed or inactive cases) for DCH costs and contractual fees associated with retroactive collections and improving ongoing DCH reimbursement management functions Funding Source(s): Federal 375,000 Restricted 375,000  <i>Related Boilerplate Section(s): 601(2)</i>
IDEA, federal special education	120,000	Supplements state psychiatric hospital special education programs for persons with mental illness; allocations based on annual counts of students aged 5 through 26 Funding Source(s): Federal 120,000  <i>Related Boilerplate Section(s): None</i>
Special maintenance and equipment	335,300	Maintenance projects at state hospitals and centers; client-related, administrative, and housekeeping/maintenance equipment needs; maintenance and operation of leased properties Funding Source(s): Restricted 332,500 GF/GP 2,800  <i>Related Boilerplate Section(s): None</i>
Purchase of medical services for residents of hospitals and centers	2,045,600	Special, emergency, and other medical-related services rendered off-site for residents of state hospitals and centers without insurance or ability to pay Funding Source(s): GF/GP 2,045,600  <i>Related Boilerplate Section(s): None</i>

Closed site, transition, and related costs	100	Placeholder for unemployment compensation, terminal payouts (sick leave payments and grievance settlements), safety and power plant operations, and phase-out costs associated with final disposition of property for closed hospital sites Funding Source(s): GF/GP 100 <i>Related Boilerplate Section(s): 605</i>
Severance pay	216,900	Payments to employees (with more than one year of service) laid off due to census reductions or closures of state hospitals and centers Funding Source(s): GF/GP 216,900 <i>Related Boilerplate Section(s): None</i>
Gifts and bequests for patient living and treatment environment	1,000,000	Authority for DCH to accept gifts/bequests for specific enhancements (consistent with donor stipulation) for residents of state-operated facilities Funding Source(s): Private 1,000,000 <i>Related Boilerplate Section(s): 602</i>
<b>GROSS APPROPRIATION</b>	<b>\$301,441,200</b>	<b>Total of all applicable line item appropriations</b>
Interdepartmental grant from the department of corrections	38,108,200	From DOC for costs related to providing forensic mental health services
Total federal revenue	39,520,900	Includes Title XIX Medicaid, national school lunch program, and IDEA (federal special education)
CMHSP, purchase of state services contracts	136,239,300	Funds from CMHSPs and PIHPs, as part of authorization process, to offset line item in Community Mental Health/Substance Abuse Services Programs appropriation unit
Other local revenue	17,094,400	County match revenue and local school aid funds
Total private revenue	1,000,000	Gifts and bequests
Total state restricted revenue	11,517,700	Includes miscellaneous, first/third party reimbursement, and lease/rental revenue
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$57,960,700</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 106: PUBLIC HEALTH ADMINISTRATION

*This appropriation unit provides funding for the administrative, policy, and leadership functions necessary to ensure the implementation of the public health mission, address health disparities of minority populations, record the state's vital events, and promote healthy behaviors.*

Full-time equated classified positions	89.4	Full-time equated (FTE) positions in the state classified service
Public health administration – 11.0 FTE positions	\$1,708,100	FTEs, contractual services, and other related costs for administration of community public health <div style="text-align: right; margin-left: 200px;">                     Funding Source(s):      Federal      97,200                         Restricted      209,400                         GF/GP      1,401,500                 </div>
<i>Related Boilerplate Section(s): 218</i>		
Minority health grants and contracts – 3.0 FTE positions	1,491,000	FTEs, related costs, and grants to improve health status of minorities and reduce health disparities through prevention, health promotion and screening programs for African-Americans, Hispanic/Latinos, Arab/Chaldeans, American Indians, and Asian/Pacific Islanders <div style="text-align: right; margin-left: 200px;">                     Funding Source(s):      Federal      591,000                         Restricted      900,000                 </div>
<i>Related Boilerplate Section(s): None</i>		
Promotion of healthy behaviors	1,000,000	New line item to execute 3-year grant for middle-school student-led programs in underserved communities to improve health related behaviors and address health disparities, and partially support the Surgeon General position <div style="text-align: right; margin-left: 200px;">                     Funding Source(s):      Private      1,000,000                 </div>
<i>Related Boilerplate Section(s): None</i>		
Vital records and health statistics – 75.4 FTE positions	9,947,900	FTEs, related costs, and contracts to administer state's vital records and statistics system, including register all vital events, maintain repository of vital record documents, maintain data and electronic transferal systems, issue certified copies of records, amend vital records, surveillance of vital events, report on mortality, morbidity, and certain conditions including cancer and birth defects, birth verification system for Medicaid program, paternity registry for DHS, and enhance system automation and interface supported by federal Medicaid grant <div style="text-align: right; margin-left: 200px;">                     Funding Source(s):      IDG      745,300                         Federal      4,323,900                         Restricted      4,878,700                 </div>
<i>Related Boilerplate Section(s): None</i>		
<b>GROSS APPROPRIATION</b>	<b>\$14,147,000</b>	<b>Total of all applicable line item appropriations</b>
Interdepartmental grant from department of human services	745,300	Federal funds granted from Department of Human Services (DHS) for vital records and central paternity registry access related to paternity and child support cases
Total federal revenue	5,012,100	Title XIX Medicaid funds, preventive health and health services block grant, vital statistics grant, cancer registry grant, social security birth enumeration grant, minority health state partnership grant, Medicaid transformation grant, and surveillance, epidemiology and end results (SEER) grant funds through Wayne State University
Total private revenue	1,000,000	Private grant from the W. K. Kellogg Foundation for promotion of healthy behaviors

Total state restricted revenue	5,988,100	Vital records fee revenue, Michigan Health Initiative Fund revenue from software tax (1987 PA 258), and Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections)
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$1,401,500</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 107: HEALTH POLICY, REGULATION, AND PROFESSIONS

*This appropriation unit provides funding for the Health Policy, Regulation, and Professions Administration, Office of the Chief Nurse Executive, Bureaus of Health Systems and Health Profession, Office of Legal Affairs, Community Assessment Division, and Administrative Tribunal and Appeals Division which administers programs involved in the licensing, regulation, and registration of various health care facilities, substance abuse programs, emergency medical services authorities, radiation machines, clinical laboratories, and various health professions. This appropriation unit also provides funding for the Certificate of Need (CON) Program Administration, Rural Health Services, Michigan Essential Health Care Provider Program, and Primary Care Services.*

Full-time equated classified positions	423.6	Full-time equated (FTE) positions in the state classified service												
Health systems administration – 194.6 FTE positions	\$22,514,800	<p>Bureau of Health Systems includes the following:</p> <p><u>Nursing Home Monitoring</u>: survey/investigate/assess/evaluate long-term care facility compliance with Medicare/Medicaid certification and licensure requirements</p> <p><u>Licensing and Certification</u>: license/recommend Medicare/ Medicaid certification for health facilities, except long-term care facilities</p> <p><u>Operations</u>: investigate nursing home residents' complaints and facility-reported incidents; process/coordinate enforcement against facilities</p> <p><u>Health Facilities and Services</u>: conduct physical plant evaluations for construction/modernization projects for health facilities and licensing and certification surveys of licensed health care facilities</p> <p><u>Substance Abuse Licensing</u>: license substance abuse prevention/treatment programs statewide and investigate complaints by recipients of licensed substance abuse programs</p> <table style="margin-left: 40px;"> <tr> <td>Funding Source(s):</td> <td>Federal</td> <td style="text-align: right;">13,909,700</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">3,700,600</td> </tr> <tr> <td></td> <td>Private</td> <td style="text-align: right;">200,000</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">4,704,500</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): 705, 706, 708, 714</i></p>	Funding Source(s):	Federal	13,909,700		Restricted	3,700,600		Private	200,000		GF/GP	4,704,500
Funding Source(s):	Federal	13,909,700												
	Restricted	3,700,600												
	Private	200,000												
	GF/GP	4,704,500												
Emergency medical services program state staff – 8.5 FTE positions	1,471,900	<p>Emergency Medical Services (EMS) Section to license/re-license approximately 800 medical first responder/life support agencies and 1,500 life support vehicles; approve medical control authorities which provide community based pre-hospital emergency care oversight</p> <table style="margin-left: 40px;"> <tr> <td>Funding Source(s):</td> <td>Federal</td> <td style="text-align: right;">431,500</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">698,200</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">342,200</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	431,500		Restricted	698,200		GF/GP	342,200			
Funding Source(s):	Federal	431,500												
	Restricted	698,200												
	GF/GP	342,200												
Radiological health administration – 21.4 FTE positions	2,671,600	<p>Radiation Safety Section annually registers over 28,000 X-ray machines used in approximately 9,000 medical and non-medical radiation facilities statewide; conducts periodic radiation safety inspections for compliance with federal and state requirements</p> <table style="margin-left: 40px;"> <tr> <td>Funding Source(s):</td> <td>Federal</td> <td style="text-align: right;">647,900</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">2,023,700</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	647,900		Restricted	2,023,700						
Funding Source(s):	Federal	647,900												
	Restricted	2,023,700												
Emergency medical services grants and services – 7.0 FTE positions	488,700	<p>Contracts administered by EMS Section for continuing education, agency/vehicle inspections; administers licensure examinations; staff responsible for EMS testing, inspections, and certifications</p> <table style="margin-left: 40px;"> <tr> <td>Funding Source(s):</td> <td>Federal</td> <td style="text-align: right;">420,800</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">67,900</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): 704</i></p>	Funding Source(s):	Federal	420,800		GF/GP	67,900						
Funding Source(s):	Federal	420,800												
	GF/GP	67,900												

Health professions – 142.0 FTE positions	20,950,600	Administration of Bureau of Health Professions includes the following: <u>Investigations</u> : conduct investigations on alleged violations involving health care professionals; inspect and audit pharmacies, drug manufacturers, and drug wholesalers <u>Regulatory</u> : review allegations, investigative reports, and administrative complaints filed against health care professionals; executive direction/administrative support for health professional boards/task forces established by Public Health Code <u>Licensing</u> : process licensure/registration applications for 33 health occupations, maintain official records for over 375,000 licensees and registrants; conduct continuing education audits on licensees Funding Source(s): Federal 3,476,700 Restricted 17,473,900  <i>Related Boilerplate Section(s): None</i>
Background check program	4,474,400	New line item created for implementing the Criminal Background Check Program for employees of health facilities Funding Source(s): Federal 1,072,900 Restricted 3,401,500  <i>Related Boilerplate Section(s): None</i>
Health policy, regulation, and professions administration – 30.7 FTE positions	5,538,300	Staff to oversee Bureau of Health Professions, Bureau of Health Systems, Office of Legal Affairs, Community Assessment Division, and Administrative Tribunal and Appeals Division Funding Source(s): Federal 3,200,100 Restricted 788,800 GF/GP 1,549,400  <i>Related Boilerplate Section(s): None</i>
Nurse scholarship, education, and research program – 3.0 FTE positions	988,700	Supports establishing/operating a nurse continuing education program, nursing scholarship program, and research/development studies that promote/advance the nursing profession; funds Chief Nurse Executive Funding Source(s): Restricted 988,700  <i>Related Boilerplate Section(s): 707</i>
Certificate of need program administration – 14.0 FTE positions	1,769,300	FTEs, contractual services, supplies/travel/equipment/other costs to carry out Certificate of Need (CON) program (state regulatory program to balance cost, quality, and access issues, and ensure that only needed health services and facilities are developed in Michigan) Funding Source(s): IDG 116,300 Restricted 1,653,000  <i>Related Boilerplate Section(s): None</i>
Rural health services – 1.0 FTE position	1,403,800	Contract to Michigan Center for Rural Health to coordinate, plan, and advocate for improved health and health care for residents in rural areas, assist small rural hospitals to comply with federal privacy and prospective pay system guidelines, and provide technical assistance to DCH on rural health issues and programs Funding Source(s): Federal 1,277,800 GF/GP 126,000  <i>Related Boilerplate Section(s): None</i>
Michigan essential health provider	1,847,100	Assist primary care physicians, psychiatrists, dentists, nurse practitioners, nurse midwives, and physician assistants who practice in designated medically underserved areas in repayment of health education loans Funding Source(s): Federal 924,000 Local 227,700 Private 150,000 GF/GP 545,400  <i>Related Boilerplate Section(s): 709</i>

Primary care services – 1.4 FTE positions	2,382,700	Grants to community health centers for primary health care, outreach, and health education services in medically underserved areas; funds that are equally distributed to free health clinics; funds for rural health services and tribal elders programs of 12 Michigan tribes
		Funding Source(s): Federal 1,380,700 GF/GP 1,002,000
<i>Related Boilerplate Section(s): 271, 710, 712, 713, 715, 717</i>		
<b>GROSS APPROPRIATION</b>	<b>\$66,501,900</b>	<b>Total of all applicable line item appropriations</b>
Interdepartmental grant from treasury	116,300	From Department of Treasury's Michigan State Hospital Finance Authority for part of costs related to certificate of need program
Total federal revenue	26,742,100	Includes Title XIX Medicaid, Title XVIII Medicare, random moment sampling cost revenue, and the following grants: maternal and child health block, preventive health and health services block, clinical laboratory improvement, EMS for children partnership, rural health flexibility program, Medicaid transformation, highway safety EMS and trauma, mammography quality standards, state Office of Rural Health, small rural hospital, state loan repayment, primary care, prescription drug monitoring, and background check pilot program
Total local revenue	227,700	Local match provided by CMHSPs for federal revenue
Total private revenue	350,000	Realized from loan repayments on behalf of primary care providers in underserved areas and civil monetary penalties
Total state restricted revenue	30,728,400	Includes Health Professional Regulatory Fund revenue, health systems fees/collections, Nurse Professional Fund revenue, Pain Management Fund revenue, and CON fee revenue
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$8,337,400</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 108: INFECTIOUS DISEASE CONTROL

*This appropriation unit provides funding to prevent and control morbidity, disability, and death associated with communicable diseases through assessment, surveillance, intervention, and evaluation.*

Full-time equated classified positions	51.0	Full-time equated (FTE) positions in the state classified service								
AIDS prevention, testing, and care programs – 12.0 FTE positions	\$37,463,900	FTEs, related costs, and grants to local health departments and community groups for: HIV counseling, testing, referral, partner notification and counseling; HIV/AIDS education and outreach; HIV/AIDS risk reduction program focusing on at-risk populations through prevention, care, and laboratory testing; and HIV/AIDS continuum of care program of health care and support services to families and individuals living with HIV/AIDS, including drug assistance and dental programs	Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">24,832,100</td> </tr> <tr> <td>Private</td> <td style="text-align: right;">7,997,900</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">4,633,900</td> </tr> </table>	Federal	24,832,100	Private	7,997,900	Restricted	4,633,900
Federal	24,832,100									
Private	7,997,900									
Restricted	4,633,900									
			<i>Related Boilerplate Section(s): 218, 801, 802, 803, 804</i>							
Immunization local agreements	13,990,300	Funds to local public health departments and community health centers for immunization clinics, free vaccinations for eligible children, vaccine handling and distribution, statewide Michigan Care Improvement and immunization registry, outreach and education, perinatal hepatitis B prevention, provider quality assurance, training and technical support, and other projects,	Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">9,428,200</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">2,250,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">2,312,100</td> </tr> </table>	Federal	9,428,200	Restricted	2,250,000	GF/GP	2,312,100
Federal	9,428,200									
Restricted	2,250,000									
GF/GP	2,312,100									
			<i>Related Boilerplate Section(s): 218, 806</i>							
Immunization program management and field support – 15.0 FTE positions	2,003,500	FTEs and related cost to administer state immunization program including disease surveillance and outbreak control	Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">1,321,800</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">354,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">326,800</td> </tr> </table>	Federal	1,321,800	Restricted	354,900	GF/GP	326,800
Federal	1,321,800									
Restricted	354,900									
GF/GP	326,800									
			<i>Related Boilerplate Section(s): 218, 806</i>							
Pediatric AIDS prevention and control – 1.0 FTE position	1,224,800	FTE and contracts to coordinate comprehensive medical care and social support services for HIV-infected infants, children, and their families, including outreach, primary and specialty medical care, psychological services, case management, HIV risk reduction and prevention education, recreation activities, and logistical support for coordination of services	Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">1,224,800</td> </tr> </table>	Federal	1,224,800				
Federal	1,224,800									
			<i>Related Boilerplate Section(s): None</i>							
Sexually transmitted disease control local agreements	3,360,700	Funds to local public health departments to monitor and control the occurrence of sexually transmitted diseases in the state, especially 15 highest incidence areas representing over 90% of all cases, including surveillance, investigation, diagnosis, primary treatment, screening, casefinding, prevention, and laboratory services	Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">2,938,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">421,800</td> </tr> </table>	Federal	2,938,900	GF/GP	421,800		
Federal	2,938,900									
GF/GP	421,800									
			<i>Related Boilerplate Section(s): 218</i>							

Sexually transmitted disease control management and field support – 23.0 FTE positions	3,676,600	FTEs and related costs for state administration to monitor the occurrence of sexually transmitted diseases, promote prevention and education, and provide support for state, local and national STD control goals; funds for primary STD treatment drugs and laboratory costs
		Funding Source(s):
		Federal 1,139,800
		Restricted 1,452,600
		GF/GP 1,084,200

*Related Boilerplate Section(s): 218*

<b>GROSS APPROPRIATION</b>	<b>\$61,719,800</b>	<b>Total of all applicable line item appropriations</b>
Total federal revenue	40,885,600	Preventive health and health services block grant, maternal and child health services block grant, immunization grant, HIV prevention grant, Ryan White Title II HIV care grant, sexually transmitted disease control grant, Ryan White Title IV pediatric AIDS prevention grant, and Title XIX Medicaid funds
Total private revenue	7,997,900	Private funds from pharmaceutical manufacturer rebates for AIDS drug assistance program
Total state restricted revenue	8,691,400	Michigan Health Initiative Fund revenue from the software tax (1987 PA 258), Healthy Michigan Fund revenue from the cigarette tax (3.75% of gross collections), and Pharmaceutical Products Fund interest income from revenue related to the 1999 sale of Michigan Biologic Products Institute
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$4,144,900</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 109: LABORATORY SERVICES

*This appropriation unit provides funding for laboratory diagnostic testing, analytical services, and related functions to detect disease or the source of disease*

Full-time equated classified positions	122.0	Full-time equated (FTE) positions in the state classified service
Bovine tuberculosis – 2.0 FTE positions	\$500,000	FTEs, supplies, contractual services, and other related expenses to support the bovine tuberculosis eradication program, providing laboratory testing and epidemiological surveillance <div style="text-align: right; margin-left: 200px;">Funding Source(s):    Restricted    500,000</div> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>
Laboratory services – 120.0 FTE positions	18,359,100	FTEs, supplies, travel, equipment, computer, and contractual services for laboratory services: tests to identify and monitor infectious disease agents; collect epidemiological and analytical laboratory data to assess human health risks; tests of blood samples of children screened for lead and newborn infants screened for genetic handicapping conditions; tests for environmental risks such as lead in soil and toxins in fish that may be consumed; tests to detect biologic terrorist agents; and funds for regional and local laboratory services <div style="text-align: right; margin-left: 200px;">Funding Source(s):                    IDG                    440,400  <span style="margin-left: 100px;">Federal                    2,794,600</span>  <span style="margin-left: 100px;">Restricted                7,484,400</span>  <span style="margin-left: 100px;">GF/GP                    7,639,700</span></div> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>
<b>GROSS APPROPRIATION</b>	<b>\$18,859,100</b>	<b>Total of all applicable line item appropriations</b>
Interdepartmental grant from environmental quality	440,400	Grant from Department of Environmental Quality for costs related to laboratory testing of Michigan fish for contaminants
Total federal revenue	2,794,600	Title XIX Medicaid funds, preventive health and health services block grant, tuberculosis control grant, immunization grant, epidemiology and laboratory capacity grant, tuberculosis genotyping and surveillance grant, Association of Public Health Laboratories (APHL) influenza grant, and food and waterborne disease grant
Total state restricted revenue	7,984,400	Fee revenue collected for laboratory services and newborn screening services, and Michigan Health Initiative Fund revenue from the software tax (1987 PA 258)
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$7,639,700</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 110: EPIDEMIOLOGY

*This appropriation unit funds surveillance, assessment, and monitoring of the status of infectious and chronic disease, environmental health, and injury in Michigan as well as conditions that adversely affect maternal and child health. This unit is also responsible for the following: preparedness for chemical events that threaten human health including bioterrorism, Michigan Fish Advisory, lead abatement, asthma prevention, tuberculosis control, newborn screening, and genomics programs.*

Full-time equated classified positions	134.5	Full-time equated (FTE) positions in the state classified service	
AIDS surveillance and prevention program	\$2,254,100	Contracts for integrated surveillance of statewide HIV infection and AIDS case reports to measure incidence and prevalence of disease, for targeted HIV prevention and intervention programs	Funding Source(s): Federal 2,254,100
<i>Related Boilerplate Section(s): None</i>			
Asthma prevention and control – 2.3 FTE positions	1,065,000	FTEs, related expenses and contracts for statewide and community-based asthma programs and services including surveillance, patient and provider education, public awareness, school-based programs, environmental quality programs, and Michigan Asthma Communication Network programs	Funding Source(s): Federal 842,200 GF/GP 222,800
<i>Related Boilerplate Section(s): None</i>			
Bioterrorism preparedness – 76.1 FTE positions	50,953,300	FTEs, related expenses, and contracts for preparedness and response by public health system and hospitals to bioterrorism, pandemic influenza, and other public health threats and emergencies. Public health system preparedness priorities: medical and pharmaceutical supply stockpile planning, disease and epidemiology surveillance, training, biological and chemical laboratory capacity, communications, Health Alert Network, education, and disseminate risk and health information. Hospital preparedness priorities: pharmaceutical and vaccine supply, quarantine and decontamination facilities, regional capacity, and communications; hospital preparedness funds administered through eight regional medical care authorities	Funding Source(s): Federal 50,953,300
<i>Related Boilerplate Section(s): None</i>			
Epidemiology administration – 41.1 FTE positions	6,632,100	FTEs and related costs to monitor disease activity, toxins, and environmental conditions in order to detect, prevent, and control risk and spread of communicable and non-communicable disease; coordinate epidemiological investigation, behavioral risk factor survey and environmental health risk assessment; maintain Michigan Disease Surveillance System, polybrominated biphenyl registry (PBB), and birth defects registry; hazardous substances emergency events surveillance, and other special projects	Funding Source(s): Federal 4,378,400 Private 25,000 Restricted 199,800 GF/GP 2,028,900
<i>Related Boilerplate Section(s): None</i>			

Lead abatement program – 7.0 FTE positions	2,177,700	FTEs, costs, and contracts to: provide for safe removal and local oversight of lead hazards from older homes in areas of the state with high incidence of lead-poisoned children; certify individuals to perform lead abatement and lead hazard remediation and training; compliance assistance and enforcement; education and outreach; and Healthy Homes indoor environmental asthma and injury demonstration project in Ingham County	Funding Source(s): Federal Restricted	1,915,800 261,900
<i>Related Boilerplate Section(s): 851</i>				
Newborn screening follow-up and treatment services – 8.0 FTE positions	4,409,500	FTEs, related expenses, and contracts to screen all newborn infants for 49 (as of 10/1/07) genetic disorders and to provide follow-up services such as education, diagnosis, counseling, treatment and medical management after a newborn child tests positive; early hearing screening and detection program; and genetic disease program for adults and children	Funding Source(s): Restricted	4,409,500
<i>Related Boilerplate Section(s): 218</i>				
Tuberculosis control and prevention	867,000	Funding to local health departments and other contracts for the prevention and control of tuberculosis, including directly-observed therapy, medication administration, surveillance, and care for certain patients with tuberculosis	Funding Source(s): Federal	867,000
<i>Related Boilerplate Section(s): 218</i>				
<b>GROSS APPROPRIATION</b>	<b>\$68,358,700</b>	<b>Total of all applicable line item appropriations</b>		
Total federal revenue	61,210,800	Federal grants for health risk assessment, HIV/AIDS surveillance, HIV/AIDS morbidity and risk behavior surveillance, tuberculosis control, epidemiology and laboratory capacity, core occupational safety and health research, public health preparedness and response for bioterrorism, bioterrorism hospital preparedness, behavioral risk factor surveillance, asthma, genetics, birth defects surveillance, genomics and chronic disease prevention, federal grant from Emory University for work related to polybrominated biphenyls and endocrine disruptors, hazardous substances emergency events surveillance, impact of exposure to urban air toxics on asthma, HUD lead-based paint hazard control grant, EPA lead grant for certification of lead-based paint professionals, and HUD healthy homes demonstration program		
Total private revenue	25,000	Grant from March of Dimes for work related to birth defects and folic acid projects		
Total state restricted revenue	4,871,200	Fee revenue collected from newborn screening program and from lead abatement professional worker certification, and Michigan Health Initiative Fund revenue from software tax (1987 PA 258)		
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$2,251,700</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>		

## SECTION 111: LOCAL HEALTH ADMINISTRATION AND GRANTS

*This appropriation unit provides funding to improve the health status of Michigan residents through accessible health care services delivered by local public health departments and other health care organizations.*

Implementation of 1993 PA 133, MCL 333.17015	\$50,000	Production and distribution of informational materials required to be provided to a woman seeking an abortion at least 24 hours prior to the procedure, in accordance with the Informed Consent Law, Public Act 133 of 1993	Funding Source(s): GF/GP 50,000
<i>Related Boilerplate Section(s): 901</i>			
Local health services	220,000	Contractual services to support the development and implementation of uniform local public health service delivery and reporting standards, and to support local health department evaluation and accreditation to promote standards compliance	Funding Source(s): Restricted 220,000
<i>Related Boilerplate Section(s): None</i>			
Local public health operations	40,618,400	Prospective payments to local health departments toward the state share of the 50% state and local match rate for projected allowable expenditures for the following required local public health services: immunizations, infectious disease control, sexually transmitted disease control, hearing and vision screening, food protection in cooperation with Department of Agriculture, and the following in cooperation with Department of Environmental Quality - public water and private groundwater supplies, and on-site sewage management	Funding Source(s): Local 5,150,000 GF/GP 35,468,400
<i>Related Boilerplate Section(s): 218, 902, 904, 905</i>			
Medical services cost reimbursement to local health departments	4,000,000	Reimbursement to local health departments for costs incurred for outreach to Medicaid clients. Funding is available from federal Medicaid reimbursement match grants as eligible costs are incurred by local public health departments.	Funding Source(s): Federal 4,000,000
<i>Related Boilerplate Section(s): None</i>			
<b>GROSS APPROPRIATION</b>	<b>\$44,888,400</b>	<b>Total of all applicable line item appropriations</b>	
Total federal revenue	4,000,000	Title XIX Medicaid funds	
Total local revenue	5,150,000	Local school district funds received from the state School Aid Fund for hearing and vision screening of school children that is provided by local public health departments	
Total state restricted revenue	220,000	Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections)	
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$35,518,400</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>	

## SECTION 112: CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

*This appropriation unit provides funding for programs to promote healthy lifestyles, prevent chronic diseases, and reduce injuries and violent behavior statewide and for vulnerable and high-risk populations, to improve the length and quality of life for Michigan residents.*

Full-time equated classified positions	70.5	Full-time equated (FTE) positions in the state classified service		
African-American male health initiative	\$106,700	Grant for initiative to improve the health of African-American men in Michigan with community-based screening for chronic diseases, follow-up counseling, education, and referrals	Funding Source(s):	GF/GP 106,700
				<i>Related Boilerplate Section(s): 1028</i>
AIDS and risk reduction clearinghouse and media campaign	1,576,000	Information clearinghouse to develop, collect and distribute health promotion materials to Michigan residents; and contractual services to develop, produce, and air television, radio, and billboard health promotion messages	Funding Source(s):	Restricted 1,576,000
				<i>Related Boilerplate Section(s): None</i>
Alzheimer's information network	389,500	Grants to support statewide Michigan Dementia Coalition, and to regional information and referral centers for prevention activities, education, and support for persons with Alzheimer's disease, Huntington's disease, and Parkinson's disease, and their families and caregivers	Funding Source(s):	Federal 99,500 Restricted 290,000
				<i>Related Boilerplate Section(s): 1003</i>
Cancer prevention and control program – 18.3 FTE positions	15,183,500	FTEs, related expenses, grants and contracts for cancer prevention and control including: prevention activities; screening and follow-up services for breast and cervical cancer; public and provider education, awareness about early detection; Michigan Cancer Consortium support; colorectal cancer detection pilot; and heart and chronic disease screening and referrals	Funding Source(s):	Federal 12,177,300 Restricted 2,586,900 GF/GP 419,300
				<i>Related Boilerplate Section(s): None</i>
Chronic disease prevention – 10.0 FTE positions	4,277,600	FTEs, related costs, grants, and contracts for chronic disease surveillance activities and community, school and worksite-based chronic disease prevention programs regarding obesity, cardiovascular health, fitness and nutrition, stroke prevention, arthritis, osteoporosis prevention, and Huntington's Disease	Funding Source(s):	Federal 1,980,800 Restricted 2,191,800 GF/GP 105,000
				<i>Related Boilerplate Section(s): 1010, 1019</i>

Diabetes and kidney program – 13.1 FTE positions	3,999,500	FTEs, related expenses, and contracts for diabetes prevention, education, control, and outreach projects; grants to regional diabetes outreach network entities and communities with a high incidence of diabetes; and funds for kidney disease prevention programs and implementation of the State Renal Plan	Funding Source(s):	Federal Restricted	1,502,900 2,496,600
<i>Related Boilerplate Section(s): 1009</i>					
Health education, promotion, and research programs – 9.3 FTE positions	809,000	FTEs, and contractual and other related costs for division administration and infrastructure for health promotion and education, and chronic disease prevention and education	Funding Source(s):	Restricted GF/GP	392,200 416,800
<i>Related Boilerplate Section(s): None</i>					
Injury control intervention project – 1.0 FTE position	104,500	FTE and contracts for traumatic brain injury program; funding serves as required matching funds for federal traumatic brain injury grant in the Federal and Other Special Projects line item	Funding Source(s):	GF/GP	104,500
<i>Related Boilerplate Section(s): 1031</i>					
Michigan Parkinson's Foundation	50,000	Support for the Michigan Parkinson's Initiative, for education and clinical programs for persons with Parkinson's Disease and their families, and for providers	Funding Source(s):	Restricted	50,000
<i>Related Boilerplate Section(s): None</i>					
Morris Hood Wayne State University diabetes outreach	400,000	Grant for statewide and community outreach programs of the Morris Hood Comprehensive Diabetes Center at Wayne State University	Funding Source(s):	Restricted	400,000
<i>Related Boilerplate Section(s): None</i>					
Physical fitness, nutrition, and health	700,000	Grant to support a statewide network of local physical fitness, health, and sports councils, maintain a physical fitness curriculum for kindergarten through grade 12 schoolchildren, provide teacher training, and distribute sports injury prevention education materials	Funding Source(s):	Restricted	700,000
<i>Related Boilerplate Section(s): None</i>					
Public health traffic safety coordination – 1.7 FTE positions	356,400	FTEs, costs and contracts for projects to prevent motor vehicle-related injuries to children, primarily child safety education and car booster seat safety for children	Funding Source(s):	Federal	356,400
<i>Related Boilerplate Section(s): None</i>					
Smoking prevention program – 15.1 FTE positions	5,720,400	FTEs, related expenses, and contracts for smoking prevention and cessation programs including: smoking cessation hotline, free nicotine Quit Kits and nicotine replacement therapy; local projects of schools, communities, and local health departments; smoke-free initiatives for hospitals, apartments and other environments; enforcement of Clean Indoor Air Act; anti-tobacco media campaign; Michigan Model clearinghouse of health curriculum materials for schools	Funding Source(s):	Federal Private Restricted	1,947,000 85,000 3,688,400
<i>Related Boilerplate Section(s): 1006</i>					

Tobacco tax collection and enforcement	610,000	Grant to Department of State Police for tobacco tax collection and enforcement activities to discourage illegal purchase or sale Funding Source(s): Restricted 610,000 <i>Related Boilerplate Section(s): None</i>
Violence prevention – 2.0 FTE positions	1,889,500	FTEs, related costs and contractual services for: sexual violence prevention including rape and sexual assault primary prevention and education programs; and for expansion of youth suicide prevention and early intervention programs, training, infrastructure, and awareness Funding Source(s): Federal 1,889,500 <i>Related Boilerplate Section(s): 1007</i>
<b>GROSS APPROPRIATION</b>	<b>\$36,172,600</b>	<b>Total of all applicable line item appropriations</b>
Total federal revenue	19,953,400	Includes the following grants: preventive health and health services block, breast and cervical cancer early detection program, comprehensive cancer control, Title XIX Medicaid, diabetes control, state and community highway safety, arthritis, lupus, tobacco use prevention, well integrated screening and evaluation for women across the nation (WISEWOMAN), rape prevention and education, obesity, Great Lakes stroke network, and youth suicide prevention and early intervention
Total private revenue	85,000	Private grant from American Legacy Foundation to support the statewide smoking cessation hotline
Total state restricted revenue	14,981,900	Michigan Health Initiative Fund revenue from software tax (1987 PA 258) and Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections)
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$1,152,300</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 113: FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES

*This appropriation unit provides funding for programs and services to promote health and address problems of morbidity and mortality for the vulnerable population group consisting of children under age 21, women of childbearing age, and their family members.*

Full-time equated classified positions	54.4	Full-time equated (FTE) positions in the state classified service							
Childhood lead program – 6.8 FTE positions	\$2,557,500	FTEs, supplies, related costs, and contracts to screen for abnormal blood lead levels, identify lead hazards, public and provider education, provide lead poisoning prevention services, and conduct surveillance of children with elevated blood lead levels, primarily in Detroit and high-incidence targeted counties							
		Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">1,450,600</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">1,000,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">106,900</td> </tr> </table>	Federal	1,450,600	Restricted	1,000,000	GF/GP	106,900
Federal	1,450,600								
Restricted	1,000,000								
GF/GP	106,900								
		<i>Related Boilerplate Section(s): 1129, 1152</i>							
Dental programs	485,400	Supports two programs: grants to eight local health departments for restorative dental care to low income, uninsured children and adults, transitioning to a preventive program for young children in FY 2007-08; and contractual services to coordinate the Donated Dental Services Program of services to uninsured individuals who have difficulty accessing dental services due to mental or physical handicap, visual impairment, chronic illness, or age							
		Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">335,400</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">150,000</td> </tr> </table>	Federal	335,400	Restricted	150,000		
Federal	335,400								
Restricted	150,000								
		<i>Related Boilerplate Section(s): 1109</i>							
Dental program for persons with developmental disabilities	151,000	Fund to underwrite treatment costs of essential dental services for persons with developmental disabilities who are not otherwise able to obtain or pay for these services							
		Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>GF/GP</td> <td style="text-align: right;">151,000</td> </tr> </table>	GF/GP	151,000				
GF/GP	151,000								
		<i>Related Boilerplate Section(s): None</i>							
Early childhood collaborative secondary prevention	524,000	Cooperative program with DHS and Department of Education for community-based projects to assist families in healthy child development of children 0-3 years of age at risk of abuse and neglect from family stresses and risk factors							
		Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>GF/GP</td> <td style="text-align: right;">524,000</td> </tr> </table>	GF/GP	524,000				
GF/GP	524,000								
		<i>Related Boilerplate Section(s): None</i>							
Family, maternal, and children's health services administration – 41.6 FTE positions	5,090,300	FTEs, contractual services, supplies, and other related costs to administer programs for children and families							
		Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">2,628,400</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">2,461,900</td> </tr> </table>	Federal	2,628,400	GF/GP	2,461,900		
Federal	2,628,400								
GF/GP	2,461,900								
		<i>Related Boilerplate Section(s): 218, 1105</i>							
Family planning local agreements	9,793,800	Grants to local health departments and agencies for family planning services: reproductive health assessment, comprehensive contraceptive services, health education, counseling and referral, and special projects							
		Funding Source(s):	<table style="margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">8,588,000</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">408,100</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">797,700</td> </tr> </table>	Federal	8,588,000	Restricted	408,100	GF/GP	797,700
Federal	8,588,000								
Restricted	408,100								
GF/GP	797,700								
		<i>Related Boilerplate Section(s): 1101, 1104, 1106, 1110, 1111</i>							

Local MCH services	7,264,200	Maternal and child health grants to local health departments on a per capita basis for locally-identified needs including prenatal care, immunizations, and well-child services; and grants to agencies for programs to address high infant mortality	Funding Source(s):	Federal	7,018,100
				Restricted	246,100
			<i>Related Boilerplate Section(s): 1104</i>		
Migrant health care	272,200	Grants to migrant health care agencies in areas with high migrant populations for immunization services for children, outreach, and health education	Funding Source(s):	Federal	136,100
				GF/GP	136,100
			<i>Related Boilerplate Section(s): None</i>		
Pregnancy prevention program	5,235,400	Grants to local health departments and other agencies for family planning and primary pregnancy prevention programs and services, long term contraceptive bulk purchasing program, and special projects, including expanded programming beyond the federal Title X family planning program	Funding Source(s):	Federal	602,100
				Restricted	4,633,300
			<i>Related Boilerplate Section(s): 1104, 1108, 1110, 1111</i>		
Prenatal care outreach and service delivery support	3,049,300	Grants to local health departments and other agencies for prenatal support services for low-income and uninsured pregnant women, including Nurse Family Partnership programs serving first-time, low-income pregnant women and teenagers in 4 communities with high infant mortality rates, prenatal smoking cessation, and other programs	Funding Source(s):	Federal	2,020,400
				GF/GP	1,028,900
			<i>Related Boilerplate Section(s): 218, 1101, 1104, 1107, 1112</i>		
School health and education programs	500,000	Funds to intermediate school districts for kindergarten through grade 12 school health education, the Michigan Model for Comprehensive School Health Education curriculum, and related curriculum materials; administered in partnership with Department of Education	Funding Source(s):	Restricted	500,000
			<i>Related Boilerplate Section(s): 1135</i>		
Special projects – 6.0 FTE positions	6,349,700	FTEs, related costs, grants and contracts for maternal and child health special projects: public health and mental health early on program; sexual abstinence education programs; fetal and infant mortality projects including nurse family partnership programs; fetal alcohol syndrome prevention and education; self-determination initiative for persons with developmental disabilities; pregnancy risk assessment monitoring and surveillance; oral disease prevention and education; universal newborn hearing screening; maternal mortality study; safe delivery of newborns hotline; early hearing detection and intervention, comprehensive early childhood system planning and local collaborative development; Special Needs Vision Clinic; and improved access to oral health services to children in medically underserved communities and populations	Funding Source(s):	Federal	5,199,700
				Restricted	1,100,000
				GF/GP	50,000
			<i>Related Boilerplate Section(s): 1132</i>		

Sudden infant death syndrome program	321,300	Autopsies, grief counseling, follow-up and referral services for parents who have lost a child to sudden infant death syndrome; risk reduction education for the public, and for health care and child care providers; and for reporting and surveillance
		Funding Source(s): Federal 321,300
		<i>Related Boilerplate Section(s): None</i>
<b>GROSS APPROPRIATION</b>	<b>\$41,594,100</b>	<b>Total of all applicable line item appropriations</b>
Total federal revenue	28,300,100	Includes the following federal grants: preventive health and health services block, maternal and child health services block, childhood lead poisoning prevention and surveillance, Title XIX Medicaid, Title X family planning, early-on for infants and families with disabilities, oral disease prevention, pregnancy risk assessment monitoring system (PRAMS), universal newborn hearing screening, early hearing detection and intervention, fetal alcohol syndrome prevention, Michigan abstinence partnership abstinence education, special projects of regional and national significance (SPRANS), state systems development initiative (SSDI), comprehensive school health education, closing the health gap on infant mortality: African-American-focused risk reduction; oral health workforce; and early childhood systems
Total state restricted revenue	8,037,500	Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections)
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$5,256,500</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 114: WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM

*This appropriation unit provides funding for supplemental nutritious foods, nutrition education, breast feeding education and support, and referrals for health care to low-income pregnant, breastfeeding and postpartum women, and infants and children to age five determined to be at nutritional risk.*

Full-time equated classified positions	42.0	Full-time equated (FTE) positions in the state classified service
Women, infants, and children program administration and special projects – 42.0 FTE positions	\$8,452,100	FTEs, contractual services, supplies, and other related costs to administer Women, Infants, and Children (WIC) Food and Nutrition Programs and special projects: WIC farmer's market nutrition program (Project FRESH), WIC breastfeeding peer counseling, review of counseling methods to improve consumption of fruits and vegetables among WIC participants, and annual WIC infrastructure projects including expansion of electronic benefit card system <div style="text-align: right;">Funding Source(s):      Federal      8,162,400  Private      289,700</div> <p style="text-align: center;"><i>Related Boilerplate Section(s): 1101, 1151, 1152, 1153</i></p>
Women, infants, and children program local agreements and food costs	193,273,600	Federal program of funding for grants to local public health departments and other agencies to provide nutritional food, infant formula, and counseling and education on nutrition, health, and breast-feeding to at-risk pregnant women and new mothers, infants, and children up to age five; referrals to health care and other services, local program administration, and local enrollment of participants. Rebate funds from infant formula manufacturers support food costs per federal program regulations <div style="text-align: right;">Funding Source(s):      Federal      140,319,400  Private      52,954,200</div> <p style="text-align: center;"><i>Related Boilerplate Section(s): 1101, 1152, 1153</i></p>
<b>GROSS APPROPRIATION</b>	<b>\$201,725,700</b>	<b>Total of all applicable line item appropriations</b>
Total federal revenue	148,481,800	Includes the following grants: special supplemental nutrition program for WIC, farmer's market nutrition program for WIC, WIC infrastructure for electronic benefit transfer system, and WIC special project revitalizing quality nutrition services
Total private revenue	53,243,900	Rebates from infant formula manufacturers for WIC program, and revenue from private companies related to farmer's market nutrition programs
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$0</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 115: CHILDREN'S SPECIAL HEALTH CARE SERVICES

*This appropriation unit contains funding for medical care provided through the Children's Special Health Care Services program (CSHCS) and for related administrative functions. The program pays for health services primarily to children under 21 years of age with certain chronic medical conditions that require specialty care.*

Full-time equated classified positions	45.0	Full-time equated (FTE) positions in the state classified service		
Children's special health care services administration – 45.0 FTE positions	\$4,523,100	FTEs, contractual services, supplies, and other administrative costs for Children's Special Health Care Services Division		
		Funding Source(s):	Federal	2,259,600
			Restricted	85,000
			GF/GP	2,178,500
		<i>Related Boilerplate Section(s): None</i>		
Amputee program	184,600	Operate children's amputee clinic at Mary Free Bed Hospital that provides prostheses and associated medical services		
		Funding Source(s):	Federal	184,600
		<i>Related Boilerplate Section(s): None</i>		
Bequests for care and services	1,514,600	Payment for services not covered by Medicaid or CSHCS; supports Parent Participation Program with monies from Trust Fund for Children with Special Health Care Needs		
		Funding Source(s):	Federal	104,600
			Private	1,000,000
			Restricted	410,000
		<i>Related Boilerplate Section(s): None</i>		
Outreach and advocacy	3,773,500	Grants to local health departments to identify and enroll children in the program; and case management and care coordination services		
		Funding Source(s):	Federal	2,490,300
			GF/GP	1,283,200
		<i>Related Boilerplate Section(s): 1203</i>		
Nonemergency medical transportation	1,401,100	Transportation costs for CSHCS eligible families (below 250% of poverty level) in need of assistance to access health care services		
		Funding Source(s):	Federal	283,400
			GF/GP	1,117,700
		<i>Related Boilerplate Section(s): 1773</i>		
Medical care and treatment	189,023,400	Reimburses hospitals, physicians, pharmacies, and other health care professionals providing medical services to CSHCS eligible persons		
		Funding Source(s):	Federal	94,123,400
			Restricted	1,800,000
			GF/GP	93,100,000
		<i>Related Boilerplate Section(s): 1201, 1202, 1653</i>		
<b>GROSS APPROPRIATION</b>	<b>\$200,420,300</b>	<b>Total of all applicable line item appropriations</b>		
Total federal revenue	99,445,900	Includes maternal and child health block grant, and Title XIX Medicaid funds		
Total private revenue	1,000,000	Individual and corporate donations; payments from health plans for mailing directory of plans		

Total state restricted revenue	2,295,000	Includes funds from parent pay agreements and fees associated with CSHCS programs
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$97,679,400</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 116: OFFICE OF DRUG CONTROL POLICY

*This appropriation unit provides funding for the Office of Drug Control Policy to prevent and reduce drug and alcohol use and related crime, and to strengthen enforcement, prosecution, and drug testing systems through grants and contracts with law enforcement agencies, educational providers, and other agencies.*

Full-time equated classified positions	16.0	Full-time equated (FTE) positions in the state classified service		
Drug control policy – 16.0 FTE positions	\$1,747,000	FTEs, related costs, and contracts to administer policies and programs, and to distribute grant funds related to drug law enforcement, prosecution, treatment, and drug education and prevention		
		Funding Source(s):	Federal	1,366,400
			GF/GP	380,600
		<i>Related Boilerplate Section(s): None</i>		
Anti-drug abuse grants	8,575,000	Grants for state and local efforts to reduce the demand for illegal drugs, and to support related state and local criminal justice efforts: projects include safe and drug-free schools and communities drug and violence prevention programs, multi-jurisdictional task force drug teams, drug treatment courts, residential substance abuse treatment in prisons and jails, community policing strategies, juvenile intervention strategies, family and domestic violence strategies, criminal history records improvement, and local correctional resources		
		Funding Source(s):	Federal	8,575,000
		<i>Related Boilerplate Section(s): None</i>		
Interdepartmental grant to Judiciary for drug treatment courts	1,800,000	Federal Byrne grant funds provided to the Judicial Branch, State Court Administrative Office, for drug treatment courts designed to divert felony offenders from prison and enable offenders to receive substance abuse treatment and other support services		
		Funding Source(s):	Federal	1,800,000
		<i>Related Boilerplate Section(s): 1250</i>		
<b>GROSS APPROPRIATION</b>	<b>\$12,122,000</b>	<b>Total of all applicable line item appropriations</b>		
Total federal revenue	11,741,400	Byrne justice assistance grant, residential substance abuse treatment grant for state prisoners (RSAT), safe and drug free schools and communities grants including Governor's discretionary funds		
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$380,600</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>		

## SECTION 117: CRIME VICTIM SERVICES COMMISSION

*This appropriation unit provides funding for the Crime Victim Services Commission. The Commission oversees grants, services, support, and compensation for victims of crime to protect and enhance victim health, safety, dignity and rights. The five-member Commission is appointed by the Governor.*

Full-time equated classified positions	10.0	Full-time equated (FTE) positions in the state classified service		
Grants administration services – 10.0 FTE positions	\$1,277,100	FTEs, related costs, and contracts to administer and manage grant programs for the Crime Victim Services Commission, provide publications for crime victims, and statewide automated Michigan Crime Victim Notification Network system	Funding Source(s):	Federal 298,600 Restricted 978,500
			<i>Related Boilerplate Section(s): None</i>	
Justice assistance grants	13,000,000	Grants to public/private nonprofit programs providing direct assistance to crime victims, including crisis counseling, therapy, shelter, referral, and personal/legal advocacy, with priority for victims of sexual assault, spousal abuse, child abuse, and underserved victims	Funding Source(s):	Federal 13,000,000
			<i>Related Boilerplate Section(s): 1302</i>	
Crime victim rights services grants	11,000,000	Funds for: compensation as payor of last resort to crime victims who suffer bodily injury for medical expenses, counseling, burial assistance, and loss of earnings caused by the injury; grants/training for local prosecutors and law enforcement, sheriffs, courts, jails, and other agencies to notify, inform, consult, and protect victims of crime as required by statute; and the Crime Victim Notification Network connecting prosecutors' offices with jails to inform crime victims of perpetrator status changes and court dates	Funding Source(s):	Federal 1,700,000 Restricted 9,300,000
			<i>Related Boilerplate Section(s): None</i>	
Crime Victim's Rights Fund revenue to Michigan State Police	1,027,300	New line item to appropriate available Crime Victim's Rights Fund balance for IDG to Department of State Police for sex offender registry costs, amber alert missing child notification system, polygraph tests, and forensic science expert witness testimony program	Funding Source(s):	Restricted 1,027,300
			<i>Related Boilerplate Section(s): None</i>	
Crime Victim's Rights Fund revenue to Department of Human Services	1,300,000	New line item to appropriate available Crime Victim's Rights Fund balance for IDG to DHS for costs for sexual assault victim services programs	Funding Source(s):	Restricted 1,300,000
			<i>Related Boilerplate Section(s): None</i>	
<b>GROSS APPROPRIATION</b>	<b>\$27,604,400</b>	<b>Total of all applicable line item appropriations</b>		
Total federal revenue	14,998,600	Victims of Crime Act justice assistance grant and Victims of Crime Act victim compensation grant		
Total state restricted revenue	12,605,800	Revenue from fees assessed against convicted criminal defendants that are deposited to Crime Victim's Rights Fund		
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$0</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>		

## SECTION 118: OFFICE OF SERVICES TO THE AGING

*This appropriation unit provides funding for the Office of Services to the Aging to provide supportive community-based and in-home programs, services, policies and advocacy for Michigan's older persons and their families. The fifteen-member Commission on Services to the Aging is appointed by the Governor. The Office of Services to the Aging is a Type I agency, as defined in Act 380 of the Public Acts of 1965.*

Full-time equated classified positions	36.5	Full-time (FTE) equated positions in the state classified service
Commission (per diem \$50.00)	\$10,500	<p>Per diem costs for monthly meetings and state plan hearings for members of Commission on Services to the Aging; Commission advises on policies and programs for older persons in Michigan, and approves funds for services administered under federal and state law</p> <p style="text-align: right;">Funding Source(s):      GF/GP      10,500</p> <p><i>Related Boilerplate Section(s): None</i></p>
Office of services to aging administration – 36.5 FTE positions	5,347,500	<p>FTEs, related costs, and contracts to develop, implement, and administer State Plan for Services to Michigan's Older Citizens in accordance with federal and state statutory requirements; and state long term care ombudsman</p> <p style="text-align: right;">Funding Source(s):      Federal      3,318,600         Private      20,000         GF/GP      2,008,900</p> <p><i>Related Boilerplate Section(s): 1413, 1417</i></p>
Community services	35,204,200	<p>Grants to regional Area Agencies on Aging for the following:</p> <p><u>Access to Local Services</u>: information, outreach, case coordination, transportation</p> <p><u>Alternative Care Services</u>: in-home services, adult day care</p> <p><u>Care Management Services</u>: plan and manage various services to allow frail elderly to live independently at home</p> <p><u>Community Services</u>: health education and wellness, health screening, counseling, legal assistance, senior citizen center support, and home repair</p> <p><u>Elder Abuse Prevention</u>: education and training coordination in collaboration with local and statewide organizations</p> <p><u>In-Home Services</u>: for frail elderly including personal care, and homemaker, chore, and home health aide services</p> <p><u>Long Term Care Ombudsman</u>: local advocacy services for residents of long-term care facilities and family members</p> <p><u>Medicare Medicaid Assistance Program</u>: health benefits information, counseling, and claims assistance for seniors with Medicare and Medicaid</p> <p><u>National Family Caregiver Support Program</u>: information, assistance, counseling and support, caregiver training, respite care, and supplemental services for informal caregivers</p> <p><u>Preventive Health Services</u>: disease prevention and health promotion information and services</p> <p style="text-align: right;">Funding Source(s):      Federal      20,349,900         GF/GP      14,854,300</p> <p><i>Related Boilerplate Section(s): 1401, 1404, 1416</i></p>

Nutrition services	37,922,500	Grants to regional Area Agencies on Aging for food and nutrition services for vulnerable elderly adults including at least one hot or other appropriate meal per day in a congregate setting or as a home-delivered meal, and nutrition education services; federal per-meal reimbursement supports congregate and home-delivered meals; and Senior Farmer's Market Nutrition Program (Senior Project FRESH)		
		Funding Source(s):	Federal	26,343,200
			Private	132,000
			Restricted	167,000
			GF/GP	11,280,300
		<i>Related Boilerplate Section(s): 1401, 1403</i>		
Foster grandparent volunteer program	2,813,500	Grants to local agencies for the Foster Grandparent Program: low-income seniors volunteer 20 hours per week to assist children and youth who need personal attention and special help; a stipend is paid to volunteers		
		Funding Source(s):	GF/GP	2,813,500
		<i>Related Boilerplate Section(s): None</i>		
Retired and senior volunteer program	790,200	Grants to local agencies for the Retired and Senior Volunteer Program to support community senior citizen volunteers		
		Funding Source(s):	GF/GP	790,200
		<i>Related Boilerplate Section(s): None</i>		
Senior companion volunteer program	2,021,200	Grants to local agencies for the Senior Companion Program: low-income seniors provide 20 hours per week of individualized care and assistance to frail and at-risk adults; a stipend is paid to volunteers		
		Funding Source(s):	GF/GP	2,021,200
		<i>Related Boilerplate Section(s): None</i>		
Employment assistance	2,818,300	Grants to regional Area Agencies on Aging to administer federal Senior Community Service Employment Program to provide subsidized part-time community service employment opportunities for low-income seniors		
		Funding Source(s):	Federal	2,818,300
		<i>Related Boilerplate Section(s): None</i>		
Respite care program	6,800,000	Grants to regional Area Agencies on Aging for respite care services to assist family caregivers providing care to an elderly person in need of constant supervision; respite may be provided in the home or in an adult day care setting		
		Funding Source(s):	Merit Award	5,000,000
			Restricted	1,800,000
		<i>Related Boilerplate Section(s): 1404, 1406</i>		
<b>GROSS APPROPRIATION</b>	<b>\$93,727,900</b>	<b>Total of all applicable line item appropriations</b>		
Total federal revenue	52,830,000	Federal revenue includes: Older Americans Act Title III grants for supportive services, disease prevention, nutrition services, and national family caregiver support, Title V senior community service employment grants, Title VII grants for prevention of elder abuse and long-term care ombudsman, Health and Human Services nutrition services incentive program (formerly U.S. Department of Agriculture commodity supplement funds), Social Security Act Title XIX Medicaid funds, and Centers for Medicare and Medicaid Services (CMS) research demonstration and evaluation grant		
Total private revenue	152,000	Private contributions collected by county cooperative extension agencies to support administration of Senior Farmer's Market Nutrition programs		

Merit Award Trust Fund	5,000,000	State revenue from 1998 master settlement agreement with tobacco companies
Total state restricted revenue	1,967,000	Senior Care Respite Fund revenue from escheats to the state from uncashed benefits paid by the nonprofit health care corporation Blue Cross and Blue Shield of Michigan, and Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections)
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$33,778,900</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 119: MICHIGAN FIRST HEALTHCARE PLAN

*This appropriation unit contains funding used to match existing Michigan funds to create the Michigan First Healthcare Plan, a plan to extend basic, low-cost health insurance coverage to uninsured Michigan residents.*

Michigan first healthcare plan	\$100,000,000	Funding used to match existing Michigan funds to create the Michigan First Healthcare Plan. Health insurance coverage would be provided to currently uninsured Michigan residents. The plan would require federal approval
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Funding Source(s):      Federal      100,000,000

*Related Boilerplate Section(s): 1501, 1502, 1503*

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<b>GROSS APPROPRIATION</b>	<b>\$100,000,000</b>	<b>Total of all applicable line item appropriations</b>
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Total federal revenue	100,000,000	Federal Title XIX Medicaid funds
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<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$0</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>
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## SECTION 120: MEDICAL SERVICES ADMINISTRATION

*This appropriation unit contains funding for staffing, contracts, and other administrative functions related to the Medicaid, MICHild, and indigent care programs. The functions carried out by the Medical Services Administration include the approval and payment of medical services claims, program and policy development, provider enrollment, collection of third-party resources, payment recovery, efforts to maximize the use of federal matching funds, and the development of health information technology initiatives.*

Full-time equated classified positions	362.4	Full-time equated (FTE) positions in the state classified service
Medical services administration – 362.4 FTE positions	\$68,728,900	Salary, other personnel costs, office supplies, contracts, travel, and non-computer-related equipment expenditures to administer the Medicaid program
		Funding Source(s):
		Federal
		Local
		Restricted
		GF/GP
		48,690,100
		5,000
		95,000
		19,938,800
		<i>Related Boilerplate Section(s): None</i>
Facility inspection contract	132,800	Funds for Medicaid's share of fire safety inspections of medical care facilities conducted by the Department of Labor and Economic Growth
		Funding Source(s):
		GF/GP
		132,800
		<i>Related Boilerplate Section(s): None</i>
MICHild administration	4,327,800	Administrative services, eligibility determination, and contract monitoring costs related to MICHild program
		Funding Source(s):
		Federal
		4,327,800
		<i>Related Boilerplate Section(s): None</i>
Health information technology initiatives	5,000,000	Funding for seven Health Information Exchanges (HIEs) and the HIE Resource Center to continue health information technology initiatives begun in FY 2006-07. The HIEs and Center will design a system to streamline the sharing of medical information so patients and doctors have comprehensive access to medical information
		Funding Source(s):
		GF/GP
		5,000,000
		<i>Related Boilerplate Section(s): 1733, 1763</i>
<b>GROSS APPROPRIATION</b>	<b>\$78,189,500</b>	<b>Total of all applicable line item appropriations</b>
Total federal revenue	53,017,900	Federal Title XIX Medicaid funds and Title XXI State Children's Health Insurance Program (SCHIP) funds
Total local revenue	5,000	Funds from public hospitals
Total state restricted revenue	95,000	Funds from public university hospitals
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$25,071,600</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 121: MEDICAL SERVICES

*This appropriation unit contains funding for payment of health care services to low-income persons eligible for Medicaid, MICHild, Medicare Part D, and indigent care programs. Also included are special Medicaid financing payments which increase federal earnings, thereby reducing state GF/GP costs*

Hospital services and therapy	\$1,316,434,600	Inpatient/outpatient hospital, mental hospital, and psychiatric unit services for Medicaid eligible patients Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">814,408,700</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">362,427,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">139,598,900</td> </tr> </table>	Federal	814,408,700	Restricted	362,427,000	GF/GP	139,598,900	
Federal	814,408,700								
Restricted	362,427,000								
GF/GP	139,598,900								
<i>Related Boilerplate Section(s): 1611, 1631, 1641, 1643, 1647, 1649, 1657, 1658, 1699, 1711, 1712, 1740, 1761, 1776, 1778, 1780</i>									
Hospital disproportionate share payments	50,000,000	Special payments to facilities with high percentage of services to Medicaid, State Medical Program, and Children's Special Health Care Services recipients, plus uncompensated care Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">29,050,000</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">6,114,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">14,835,100</td> </tr> </table>	Federal	29,050,000	Restricted	6,114,900	GF/GP	14,835,100	
Federal	29,050,000								
Restricted	6,114,900								
GF/GP	14,835,100								
<i>Related Boilerplate Section(s): 1699, 1717</i>									
Physician services	311,159,900	Medicaid covered office/home visits provided by physicians, nurse midwives, and nurse practitioners; immunizations, EPSDT, prenatal care, podiatric care, family planning, and medical clinics Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">180,783,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">130,376,000</td> </tr> </table>	Federal	180,783,900	GF/GP	130,376,000			
Federal	180,783,900								
GF/GP	130,376,000								
<i>Related Boilerplate Section(s): 1631, 1635, 1636, 1756, 1780</i>									
Medicare premium payments	346,510,800	Medicare premiums/co-payments/deductibles for Medicaid-eligible persons who also qualify for Medicare, and certain other low-income Medicare beneficiaries; insurance premiums for persons with AIDS Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">201,322,800</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">145,188,000</td> </tr> </table>	Federal	201,322,800	GF/GP	145,188,000			
Federal	201,322,800								
GF/GP	145,188,000								
<i>Related Boilerplate Section(s): None</i>									
Pharmaceutical services	285,210,900	Prescription drugs, laboratory, orthotics, prosthetics, medical and oxygen supplies provided under Medicaid program Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">165,721,800</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">2,000,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">117,489,100</td> </tr> </table>	Federal	165,721,800	Restricted	2,000,000	GF/GP	117,489,100	
Federal	165,721,800								
Restricted	2,000,000								
GF/GP	117,489,100								
<i>Related Boilerplate Section(s): 1620, 1621, 1623, 1625, 1627, 1629, 1724, 1728, 1735, 1767</i>									
Home health services	5,600,000	Visiting nurse, nurse's aide, and physical therapy services provided in the home for Medicaid patients Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">4,357,500</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">1,242,500</td> </tr> </table>	Federal	4,357,500	GF/GP	1,242,500			
Federal	4,357,500								
GF/GP	1,242,500								
<i>Related Boilerplate Section(s): None</i>									
Hospice services	85,258,700	Health services to terminally ill Medicaid eligible individuals with life expectancy of six months or less: physician care, nursing care, social work, counseling in their home, in an adult foster care facility, boarding home, and home for the aged or assisted living facility Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td>Federal</td> <td style="text-align: right;">48,431,400</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">36,827,300</td> </tr> </table>	Federal	48,431,400	GF/GP	36,827,300			
Federal	48,431,400								
GF/GP	36,827,300								
<i>Related Boilerplate Section(s): 1683</i>									

Transportation	10,653,200	Non-emergency transportation costs paid through local DHS offices for Medicaid recipients to obtain regular medical care	Funding Source(s):	Federal	5,326,600
				GF/GP	5,326,600
			<i>Related Boilerplate Section(s): 1773</i>		
Auxiliary medical services	10,000,000	Chiropractic, hearing, speech, and vision services covered by Medicaid program	Funding Source(s):	Federal	3,445,200
				GF/GP	6,554,800
			<i>Related Boilerplate Section(s): 1630, 1631</i>		
Dental services	117,506,500	Dental services covered by Medicaid program	Funding Source(s):	Federal	66,521,200
				GF/GP	50,985,300
			<i>Related Boilerplate Section(s): 1630, 1631, 1633</i>		
Ambulance services	12,656,100	Medicaid covered emergency medical transportation and medically necessary non-emergency transportation services	Funding Source(s):	Federal	7,353,200
				GF/GP	5,302,900
			<i>Related Boilerplate Section(s): 1634</i>		
Long-term care services	1,554,146,800	Long-term care services to Medicaid eligible persons in nursing home settings, county medical care facilities (MCFs), and hospital chronic care units (CCUs)	Funding Source(s):	Federal	902,952,700
				Local	6,618,800
				Merit Award	139,000,000
				Restricted	222,683,200
				GF/GP	282,892,100
			<i>Related Boilerplate Section(s): 1606, 1641, 1680, 1682, 1683, 1685, 1689, 1695, 1721, 1732, 1741, 1759, 1774, 1775, 1777</i>		
Medicaid home- and community-based services waiver	123,800,300	Non-institutional services including case management, personal care, homemaker services, home delivered meals, transportation, respite care, adult day care, medical supplies and equipment, and private duty nursing are provided to the elderly and disabled that enable them to remain in their home	Funding Source(s):	Federal	71,928,000
				GF/GP	51,872,300
			<i>Related Boilerplate Section(s): 1681, 1684, 1689, 1710</i>		
Adult home help services	245,762,800	Adult home help services to Medicaid eligible aged, blind, and disabled persons which enable them to remain in independent living arrangements. Covered services include assistance with eating, toileting, bathing, dressing, taking medication, shopping, housecleaning, meal preparation, and laundry services	Funding Source(s):	Federal	142,788,200
				GF/GP	102,974,600
			<i>Related Boilerplate Section(s): 1691, 1718, 1747</i>		
Personal care services	30,716,100	Payment made directly to an adult foster care home or home for the aged to support personal care service needs of Medicaid eligibles	Funding Source(s):	Federal	17,846,100
				GF/GP	12,870,000
			<i>Related Boilerplate Section(s): 1601, 1688</i>		

Program of all-inclusive care for the elderly	11,200,000	Social and medical services for frail, elderly individuals that meet Medicaid's criteria for nursing facility level of care. This is a capitated benefit authorized by the Balanced Budget Act of 1997 (BBA) that provides a comprehensive service delivery system and integrated Medicare and Medicaid financing permitting participants to continue living at home while receiving services rather than being institutionalized. A single PACE organization becomes the sole source of services for Medicare and Medicaid beneficiaries who choose to enroll	Funding Source(s):	Federal	6,507,200
				GF/GP	4,692,800
		<i>Related Boilerplate Section(s): None</i>			
Single point of entry	14,724,200	Funds 4 Medicaid long-term care single point of entry services pilot projects. Single point of entry is a system that enables consumers to access Medicaid long-term care services and supports through one agency or organization and that promotes consumer education and choice of long-term care options	Funding Source(s):	Federal	7,362,100
				GF/GP	7,362,100
		<i>Related Boilerplate Section(s): 1686</i>			
Health plan services	2,762,069,600	Comprehensive medical services provided by health maintenance organizations enrolled as Medicaid qualified health plans and reimbursed through a fixed capitation fee	Funding Source(s):	Federal	1,633,261,500
				Local	3,665,000
				Restricted	794,004,800
				GF/GP	331,138,300
		<i>Related Boilerplate Section(s): 1635, 1636, 1647, 1650, 1651, 1652, 1653, 1654, 1655, 1656, 1657, 1658, 1659, 1660, 1661, 1662, 1666, 1739, 1740, 1749, 1752, 1756, 1763, 1764, 1772, 1775</i>			
MIChild program	38,654,300	Comprehensive health care services to non-Medicaid eligible low-income children in households with income up to 200% of poverty	Funding Source(s):	Federal	27,317,000
				GF/GP	11,337,300
		<i>Related Boilerplate Section(s): 1670, 1671, 1673, 1677</i>			
Plan first family planning waiver	27,109,000	Family planning services benefit for non-pregnant women ages 19 through 44, at or below 185 percent of poverty and who meet Medicaid eligibility. The Plan First! Medicaid family planning waiver program began July 2007 to provide preventative health care for women with the intention of helping to reduce infant mortality, child abuse, child neglect, and unintended pregnancies. The program does not include coverage for abortions or treatment of infertility	Funding Source(s):	Federal	24,306,100
				GF/GP	2,802,900
		<i>Related Boilerplate Section(s): None</i>			
Medicaid adult benefits waiver	129,284,900	Limited health care coverage for low income (at, or below 35% of the federal poverty level) adults between the ages of 19 and 64 years of age, who do not have minor children/dependent children living in their home and are not covered by health care insurance. Services covered within this line include pharmacy, emergency room services and physician services. Federal funding is provided through Title XXI	Funding Source(s):	Federal	91,365,600
				Local	6,653,800
				Restricted	6,100,000
				GF/GP	25,165,500
		<i>Related Boilerplate Section(s): 1716</i>			

County indigent care and third share plans	88,518,500	Health care coverage through county indigent care agreements for former State Medical Program eligible persons, indigent care recipients, and other low income uninsured adults. Third Share Plans provide health care coverage through medical insurance for low-income working families not eligible for Medicaid; plans are funded by equal support from employees, employers and counties	Funding Source(s):	Federal	49,906,700
				Local	38,611,800
		<i>Related Boilerplate Section(s): None</i>			
Federal Medicare pharmaceutical program	186,001,600	Phased-down state contribution (clawback provision) as required by Medicare Part D drug program	Funding Source(s):	GF/GP	186,001,600
		<i>Related Boilerplate Section(s): None</i>			
Promotion of healthy behavior waiver	10,000,000	Federal funds that will permit the state to provide financial incentives for positive health behavior practiced by Medicaid recipients	Funding Source(s):	Federal	10,000,000
		<i>Related Boilerplate Section(s): 1734</i>			
Maternal and child health	20,279,500	Payments to local health departments providing maternal and child health services under Title V of Social Security Act for difference between their actual costs and Medicaid payment rate	Funding Source(s):	Federal	20,279,500
		<i>Related Boilerplate Section(s): None</i>			
Social services to the physically disabled	1,344,900	Assistance to physically disabled adults to establish independent living arrangements and other supportive services to enable them to become more self-sufficient	Funding Source(s):	GF/GP	1,344,900
		<i>Related Boilerplate Section(s): None</i>			
Subtotal basic medical services program	7,794,603,200	Total authorization for regular Medicaid, MIChild and other medical services programs			
School-based services	83,427,700	Federal Medicaid funds paid to local school districts for language, speech, hearing, nursing services, counseling, physical and occupational therapy, and health screening services for Medicaid eligible students in school settings	Funding Source(s):	Federal	83,427,700
		<i>Related Boilerplate Section(s): 1692, 1697</i>			
Special Medicaid reimbursement	253,816,800	Special payments to various health providers which allow the state to earn additional federal Medicaid funds	Funding Source(s):	Federal	147,362,800
				Local	6,899,500
				Private	400,000
				Restricted	98,154,500
				GF/GP	1,000,000
		<i>Related Boilerplate Section(s): 1693, 1694, 1722, 1742</i>			
Subtotal special medical services payments	337,244,500	Total authorization for Medicaid school based services and special adjutor payments			
<b>GROSS APPROPRIATION</b>	<b>\$8,131,847,700</b>	<b>Total of all applicable line item appropriations</b>			
Total federal revenue	4,763,333,500	Federal Title XIX Medicaid funds, Title XXI State Children's Health Insurance Program (SCHIP) funds and Money Follows the Person funds			

Total local revenue	62,448,900	From county indigent care programs, county maintenance of effort payments for medical care facilities, and Medicaid special adjustor payments
Total private revenue	400,000	Private funds from Federally Qualified Health Centers
Merit Award Trust Fund	139,000,000	State revenue from 1998 master settlement agreement with tobacco companies
Total state restricted revenue	1,491,484,400	Health and Safety Fund, Healthy Michigan Fund, Medicaid Benefits Trust Fund, provider assessments, intergovernmental transfers, special financing and legal settlements
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$1,675,180,900</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>

## SECTION 122: INFORMATION TECHNOLOGY

*This appropriation unit contains funds for information technology services and projects administered by the Department of Information Technology (DIT) that was created pursuant to Executive Order 2001-3.*

Information technology services and projects	\$35,075,500	Information technology services/projects administered by DIT and user fees for these projects and services
		Funding Source(s):
		Federal
		Restricted
		GF/GP
		21,648,300
		3,102,200
		10,325,000
		<i>Related Boilerplate Section(s): 259, 260</i>
<hr/>		
Michigan Medicaid information system	16,801,100	Funds used to upgrade medical services claims processing system which requires approval from Centers for Medicare and Medicaid Services
		Funding Source(s):
		Federal
		GF/GP
		15,121,000
		1,680,100
		<i>Related Boilerplate Section(s): 261</i>
<hr/>		
<b>GROSS APPROPRIATION</b>	<b>\$51,876,600</b>	<b>Total of all applicable line item appropriations</b>
<hr/>		
Total federal revenue	36,769,300	Includes Title XIX Medicaid, WIC revenue which includes electronic benefit transfer grant, substance abuse block grant, Victim of Crime Act grant, and Social Security Administration electronic death registry grant
<hr/>		
Total state restricted revenue	3,102,200	Includes vital records fees, health systems fees/collections, fees assessed against convicted defendants deposited in Crime Victim's Rights Services Fund, newborn screening fees, first/third party revenue, and Health Professional Regulatory Fund
<hr/>		
<b>GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$12,005,100</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue</b>
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## BOILERPLATE SECTION INFORMATION

### **GENERAL SECTIONS**

#### **Sec. 201. State Spending**

Total FY 2007-08 state spending from state resources under Part 1 and state spending from state resources to be paid to local units of government.

#### **Sec. 202. Authorized Appropriations**

Provides that appropriations authorized under this act are subject to Management and Budget Act. Provides that funds in which the state acts as a custodian or agent are not subject to an annual appropriation.

#### **Sec. 203. Terms and Acronyms**

Provides definitions for terms and acronyms used in this act.

#### **Sec. 204. Civil Service Charges**

Requires Department of Civil Service to bill DCH at the end of the first fiscal quarter for the 1% charge authorized by State Constitution of 1963. Requires payments for total billing be made by end of the second fiscal quarter.

#### **Sec. 205. Hiring Freeze**

Imposes hiring freeze on state classified civil service employees, except internal transfers of classified employees from one position to another within a department or when freeze would result in Department being unable to deliver basic services, cause loss of revenue to the state, and result in inability of the state to receive federal funds. Requires quarterly report to Chairpersons of House and Senate Appropriations Committees on number of exceptions to hiring freeze.

#### **Sec. 206. Contingency Funds**

Appropriates up to \$100.0 million federal contingency funds, up to \$20.0 million state restricted contingency funds, up to \$20.0 million local contingency funds, and up to \$10.0 million private contingency funds; specifies that contingency funds are not available for expenditure until transferred according to Section 393(2) of the Management and Budget Act.

#### **Sec. 208. Internet Reporting Requirements**

Requires Department to use the Internet to fulfill the reporting requirements of this act.

#### **Sec. 209. American Goods or Services and Michigan Goods or Services**

Prohibits purchase of foreign goods or services, or both, if competitively priced and comparable quality American goods or services, or both, are available; provides that preference be given to goods or services, or both, manufactured by Michigan businesses if competitively priced and of comparable quality; provides that preference be given to goods or services, or both, manufactured by Michigan businesses owned and operated by veterans if competitively priced and of comparable quality.

#### **Sec. 210. Businesses in Deprived and Depressed Communities**

Requires DCH to take all reasonable steps to ensure businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both.

#### **Sec. 211. Fee Revenue and Restricted Fund Balances**

Allows fee revenue to be carried forward, with approval of State Budget Director, into the next fiscal year and to be used as the first source of funding in that fiscal year; requires report on balances of restricted funds administered by the department.

#### **Sec. 212. Caps on Funds Expended**

Caps funds expended from federal maternal and child health block grant, federal preventive health and health services block grant, federal substance abuse block grant, healthy Michigan fund, and Michigan health initiative fund. Requires report by February 1, 2008, on FY 2007-08 appropriation fund sources by line item; requires report on amount and source of funds to support FY 2008-09 Executive Budget Recommendation upon budget release. Requires all revenue source detail for consolidated revenue line item detail to be provided upon request to DCH.

#### **Sec. 213. Report on Tobacco Tax and Healthy Michigan Funds**

Requires state departments, agencies, and commissions receiving tobacco tax and healthy Michigan funds to report on programs utilizing these funds by April 1, 2008, to House and Senate Appropriations Committees, House and Senate Fiscal Agencies, and State Budget Director.

#### **Sec. 214. Use of Tobacco Tax Revenue**

Prohibits using tobacco tax revenue deposited in healthy Michigan fund for lobbying as defined in 1978 PA 472.

## BOILERPLATE SECTION INFORMATION

### **Sec. 215. Policy Changes Implementing Public Acts**

Requires a report on each policy change made to implement a public act affecting the department which took effect during the prior calendar year. Prohibits the use of appropriated funds by the department on adopting a rule that will apply and have a disproportionate economic impact on small businesses.

### **Sec. 216. Use of Prior-Year Revenue**

Allows use of prior-year revenue for write-offs of accounts receivables, deferrals, and prior-year obligations. Does not limit Department's ability to satisfy appropriation deductions in Part 1 to collections and accruals provided in the current fiscal year. Requires Department to report by March 15, 2008, on all reimbursements, refunds, adjustments, and settlements from prior years to House and Senate Appropriations Subcommittees on Community Health.

### **Sec. 218. Basic Health Services**

Lists basic health services embodied in Part 23 of the Public Health Code that are to be available and accessible throughout the state.

### **Sec. 219. DCH Contracts with the Michigan Public Health Institute**

Allows Department to contract with Michigan Public Health Institute for design and implementation of projects and other public health related activities. Requires Department to report on each funded project by November 1, 2007, and May 1, 2008, to House and Senate Appropriations Subcommittees on Community Health, House and Senate Fiscal Agencies, and State Budget Director. Requires Department to provide copies of all reports, studies, and publications produced by the Institute by September 30, 2008.

### **Sec. 220. Audits of Michigan Public Health Institute Contracts**

Requires all contracts with Michigan Public Health Institute that are funded with Part 1 appropriations to include a provision requiring financial and performance audits by the State Auditor General.

### **Sec. 223. Fees for Publications, Videos, Conferences, and Workshops**

Allows Department to establish and collect fees for publications, videos and related materials, conferences, and workshops. Requires collected fees to be used to offset expenditures for printing and mailing costs of publications, videos and related materials, and costs of conferences and workshops.

### **Sec. 248. Ambulatory Surgery Centers**

Requires Department to allow ambulatory surgery centers in the state to fully participate in the Medicaid program when hospitals are reimbursed for Medicaid services through the Michigan Medicaid information system. Requires the development and implementation of a reimbursement schedule for ambulatory surgery centers which is to be provided to the House and Senate Appropriations Subcommittees on Community Health, and House and Senate Fiscal Agencies by July 1, 2008.

### **Sec. 259. User Fees for Information Technology (IT) Services and Projects**

Requires the department to pay user fees to Department of Information Technology (DIT) for technology-related services and projects from Part 1 appropriated funds for IT. Subjects user fees to provisions of an interagency agreement between the department and DIT.

### **Sec. 260. Information Technology (IT) Work Projects**

Allows designation of Part 1 appropriated funds for IT as work projects and carried forward. Provides that funds designated for work projects are not available for expenditure until approved as work projects under Section 451a of the Management and Budget Act.

### **Sec. 261. Medicaid Management Information System Upgrade**

Provides that Part 1 appropriated funds for Medicaid management information system upgrade are contingent upon approval of an advanced planning document from Centers for Medicare and Medicaid Services. Permits the appropriation to be designated as work project and carried forward to support completion of the project.

### **Sec. 264. Submission and Applications for Medicaid Waivers**

Requires Department to notify House and Senate Appropriations Subcommittees on Community Health and House and Senate Fiscal Agencies upon the submission of a Medicaid waiver, a Medicaid state plan amendment, or similar proposal to the Centers for Medicare and Medicaid Services. Requires quarterly reports on status of discussions with federal agencies on potential or future Medicaid waiver applications.

### **Sec. 265. Retention of Reports**

Requires departments and agencies receiving Part 1 appropriations to receive and retain copies of all reports funded from Part 1 appropriations.

## BOILERPLATE SECTION INFORMATION

### **Sec. 266. Out-of-State Travel**

Limits out-of-state travel to when it is required by legal mandate, necessary to protect the health or safety of Michigan citizens, necessary to produce budgetary savings or increase state revenue, necessary to comply with federal requirements, necessary to secure specialized training for staff, or financed entirely by federal or nonstate funds, except if travel is granted an exception by the State Budget Director. Requires Department to prepare an out-of-state travel report for the preceding fiscal year by January 1, 2008.

### **Sec. 267. Disciplinary Action Against State Employee**

Prohibits Department from taking disciplinary action against an employee for communicating with a member of the Legislature or his/her staff.

### **Sec. 269. Reimbursement of Mental Health Medications**

Specifies that the funds appropriated for pharmaceutical services include funds for the reimbursement of mental health medications under the Medicaid program.

### **Sec. 270. Notification from Attorney General on Legal Actions**

Requires Department to provide written report on total amounts recovered from legal actions, programs or services for which monies were expended, details on the disposition of funds recovered from legal actions, and descriptions of facts involved in legal actions within 30 days after receipt of notice from the Attorney General of legal actions in which expenses have been recovered.

### **Sec. 271. Mental Health Services Intervention Pilot Project**

Allows a PIHP, Medicaid HMO, and federally qualified health center to establish and implement a mental health services intervention pilot project. Requires the project to provide care coordination, disease management, and pharmacy management to eligible recipients suffering from chronic disease including, but not limited to, diabetes, asthma, substance addiction, or stroke.

### **Sec. 272. Study on Administrative Efficiencies, Shared Services, and Consolidations**

Allocates up to \$150,000 for a study on administrative efficiencies, shared services, and consolidations of local public health departments, CMHSPs, coordinating agencies on substance abuse, and area agencies on aging.

### **Sec. 276. Legal Services of Attorney General**

Prohibits the use of appropriated funds by the department to hire a person to provide legal services that are the responsibility of the Attorney General. Provides that the prohibition does not apply to legal services for bonding activities and those activities authorized by the Attorney General.

### **Sec. 282. Administrative Costs for Coordinating Agencies and Area Agencies on Aging**

Requires DCH to establish uniform definitions, standards, and instructions for the classification, allocation, assignment, calculation, recording, and reporting of administrative costs by the following entities: coordinating agencies on substance abuse, Salvation Army Harbor Light program, and their subcontractors; and area agencies on aging and local providers, and their subcontractors. Requires DCH to provide a written draft of its proposed definitions, standards, and instructions by May 15, 2008.

## **DEPARTMENTWIDE ADMINISTRATION**

### **Sec. 301. Worker's Compensation Funds**

Allows Department to make payment from funds appropriated for worker's compensation for wage and salary and related fringe benefits for employees who return to work under limited duty assignments.

### **Sec. 303. First-Party Payments for Mental Health Services**

Prohibits DCH from requiring first-party payments from individuals or families with taxable income of \$10,000 or less for mental health services for determinations made in accordance with Section 818 of Mental Health Code.

## **MENTAL HEALTH/SUBSTANCE ABUSE SERVICES ADMINISTRATION AND SPECIAL PROJECTS**

### **Sec. 350. Michigan Protection and Advocacy Services**

Allows Department to enter into contract with Michigan Protection and Advocacy Services or similar organization to provide legal services for gaining and maintaining occupancy in a community living arrangement under lease or contract with DCH or CMHSPs to provide services to persons with mental illness or developmental disability.

### **Sec. 351. Methamphetamine Cleanup Fund**

Requires Department to allow local governments to apply for money to cover their administrative costs associated with methamphetamine cleanup efforts from appropriated Part 1 funds; specifies funds allocated for administrative costs shall not exceed \$800 per property. Requires Department to ensure counties are aware of availability of funds.

## BOILERPLATE SECTION INFORMATION

### **COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS**

#### ***Sec. 401. Comprehensive System of CMH Services***

Provides that Part 1 appropriated funds are to support a comprehensive system of CMH services under full authority and responsibility of local CMHSPs or prepaid inpatient health plans (PIHPs). Requires Department to ensure that each CMHSP or PIHP provides a complete array of mental health services, coordination of inpatient and outpatient hospital services, individualized plans of services, a case or care management system, and a system that serves at-risk and delinquent youth pursuant to provisions of the Mental Health Code.

#### ***Sec. 402. Contracts Between the Department and CMHSPs***

Requires final authorizations to CMHSPs or PIHPs be made upon execution of contracts between DCH and CMHSPs or PIHPs. Requires each contract with a CMHSP or PIHP to include provision that it is not valid unless total dollar obligation of all contracts entered into between DCH and CMHSPs or PIHPs for FY 2007-08 does not exceed Part 1 appropriations. Requires DCH to report immediately to House and Senate Appropriations Subcommittees on Community Health, House and Senate Fiscal Agencies, and State Budget Director if there are new contracts or amendments to contracts with CMHSPs or PIHPs that would affect enacted rates or expenditures.

#### ***Sec. 403. Multicultural Service Providers***

Requires DCH to ensure CMHSPs or PIHPs meet with multicultural service providers to develop a workable framework for contracting, service delivery, and reimbursement. Prohibits appropriations for multicultural services from being utilized for services to illegal immigrants.

#### ***Sec. 404. Report on CMHSPs***

Requires Department to provide a report by May 31, 2008, on the following for CMHSPs or PIHPs: expenditures and services data; information about access to CMHSPs; lapses and carry-forwards during FY 2006-07; information on the CMH Medicaid managed care program; performance indicator information required to be submitted to DCH in contracts with CMHSPs or PIHPs, and an estimate of the number of mental health direct care workers.

#### ***Sec. 405. Wage Increase to Direct Care Workers***

States legislative intent that the wage increase funded in previous years, including the 2% wage increase funded in FY 2006-07, for direct care workers in local residential settings, and settings where skill building, community living supports and training, and personal care services are provided continue to be paid.

#### ***Sec. 406. Appropriations for State Disability Assistance Substance Abuse Services Program***

Requires funds appropriated for state disability assistance substance abuse services program be used to support per diem and board payments in substance abuse residential facilities. Requires DCH to reimburse all eligible licensed substance abuse programs at a rate equivalent to that paid by DHS to adult foster care providers.

#### ***Sec. 407. Substance Abuse Prevention, Education, and Treatment Grants***

Requires appropriations for substance abuse prevention, education, and treatment grants be expended for contracting with coordinating agencies. Requires coordinating agencies work with CMHSPs or PIHPs to coordinate services provided to individuals with both mental illness and substance abuse diagnoses. Requires Department to approve a fee schedule for providing substance abuse services and charge participants in accordance with their ability to pay.

#### ***Sec. 408. Report on Substance Abuse Prevention, Education, and Treatment Programs***

Requires Department to report by April 15, 2008, on expenditures and services data on substance abuse prevention, education, and treatment programs for FY 2006-07.

#### ***Sec. 409. Substance Abuse Services to Clients with Children***

Requires funds for substance abuse services to be distributed in a manner to provide priority to service providers that furnish child care services to clients with children.

#### ***Sec. 410. Substance Abuse Treatment for DHS Recipients***

Requires Department to assure that substance abuse treatment is provided to applicants and recipients of public assistance through Department of Human Services who are required to obtain substance abuse treatment as a condition of eligibility for public assistance.

## BOILERPLATE SECTION INFORMATION

### **Sec. 411. Jail Diversion Services for Persons with Mental Illness or Developmental Disability**

Requires Department to ensure that each contract with a CMHSP or PIHP require the CMHSP or PIHP to implement programs to encourage diversions for persons with mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate. Requires each CMHSP or PIHP to have jail diversion services and work toward establishing relationships with representative staff of local law enforcement agencies.

### **Sec. 412. Non-Medicaid Substance Abuse Services**

Requires Department to contract with the Salvation Army Harbor Light Program for providing non-Medicaid substance abuse services at not less than the amount contracted for in FY 2006-07.

### **Sec. 414. Medicaid Substance Abuse Services**

Requires Medicaid substance abuse services to be managed by selected PIHPs pursuant to Centers for Medicare and Medicaid Services' approval of Michigan's 1915(b) waiver request to implement a managed care plan for specialized substance abuse services. Authorizes selected PIHPs to receive a capitated payment on a per eligible per month basis to assure the provision of medically necessary substance abuse services. Requires selected PIHPs to be responsible for reimbursement of claims for specialized substance abuse services. Allows PIHPs that are not coordinating agencies to continue to contract with a coordinating agency provided that the alternative arrangement is based on client service needs and has prior approval from DCH.

### **Sec. 418. Monthly Report on Medicaid Managed Mental Health Program**

Requires Department to report monthly on the amount of funding paid to PIHPs to support the Medicaid managed mental health program.

### **Sec. 423. Delivery of Substance Abuse Prevention, Education, and Treatment Programs**

Requires Department to work cooperatively with the Departments of Human Services, Corrections, Education, State Police, and Military and Veterans Affairs, within existing appropriations, to coordinate and improve the delivery of substance abuse prevention, education, and treatment programs. Requires Department to establish a Work Group examining and reviewing the source and expenditure of public and private funds for substance abuse programs and services. Requires Work Group to develop and recommend cost-effective measures for expenditure of funds and delivery of substance abuse programs and services.

### **Sec. 424. Timely Claims Process for PIHPs**

Requires PIHPs that contract with DCH to provide services to the Medicaid population to adhere to the timely claims processing and payments procedure to claims submitted by health professionals and facilities as described in 2000 PA 187.

### **Sec. 425. Independent Prisoner Study**

Requires Department to provide consultation to the Department of Corrections in completing the independent study on the prevalence of prisoners in need of mental health treatment, substance abuse services, or both, and the provision of services to prisoners in need of mental health treatment, substance abuse services, or both.

### **Sec. 428. Contingency Appropriation for PIHPs**

Requires PIHPs to provide local funds from internal resources that can be used as a bona fide source for the state match required under the Medicaid program in order to increase capitation rates for PIHPs.

### **Sec. 435. County Matching Funds to CMHSP**

Directs counties required under provisions of the Mental Health Code to provide matching funds to CMHSPs for mental health services rendered to residents in its jurisdiction to pay these funds in equal installments on a quarterly basis throughout the fiscal year.

### **Sec. 442. Medicaid Adult Benefits Waiver Program**

Expresses legislative intent that the \$40 million transferred from CMH Non-Medicaid Services to support Medicaid Adult Benefits Waiver program be used to provide state match for increases in federal funding for primary care and specialty services provided to Medicaid Adult Benefits waiver enrollees and economic increases for Medicaid Specialty Services and Supports program. Requires general fund match be transferred back to CMH Non-Medicaid Services if enrollment in Medicaid Adult Benefits Waiver program does not achieve expectations and funding for the program is not expended. Requires Department to report quarterly on a summary of eligible expenditures for the Medicaid Adult Benefits Waiver program to House and Senate Appropriations Subcommittees on Community Health.

### **Sec. 452. Financial Impact on CMHSPs**

Prohibits retroactive implementation of any policy that results in negative financial impact on CMHSPs or PIHPs.

## BOILERPLATE SECTION INFORMATION

### **Sec. 456. Consumer Choices for Mental Health Services**

Requires CMHSPs and PIHPs to honor consumer choices for skill-building assistance, rehabilitative and habilitative services, supported and integrated employment services program services, and work preparatory services provided in the community or by accredited community-based rehabilitation organizations. Requires CMHSPs and PIHPs take all necessary steps to ensure that individuals with mental illness, developmental disabilities, or substance abuse issues are placed in the least restrictive settings if that is their choice.

### **Sec. 458. Report on Recommendations of Michigan Mental Health Commission and Cost-Benefit Analysis for Residential Facilities and Specialized Mental Health Court Program**

Requires Department to report by April 15, 2008, on the following: an updated plan for implementing recommendations of the Michigan Mental Health Commission report on October 15, 2004; a cost-benefit analysis of establishing secure residential facilities of fewer than 17 beds for adults with serious mental illness including residential facilities' potential impact on the state's need for adult mental health facilities; and a cost-benefit analysis of establishing specialized mental health court program that diverts adults with serious mental illness alleged to have committed an offense deemed nonserious into treatment prior to the filing of any charges.

### **Sec. 460. Uniform Standards for Reporting of Administrative Costs by Subcontractors of CMHSPs**

Requires DCH to fully implement the uniform definitions, standards, and reporting of administrative costs by subcontractors of PIHPs, CMHSPs, and contracted organized provider systems that receive payment or reimbursements from PIHPs and CMHSPs in FY 2007-08.

### **Sec. 462. Funding Equity Plan for CMH Non-Medicaid Services**

Requires DCH to implement a funding equity plan for all CMHSPs receiving funds appropriated under CMH Non-Medicaid Services. Requires the funding plan to reflect a combination of a more equitable distribution methodology based on proxy measures of need and recognition of varying expenditure needs of CMHSPs.

### **Sec. 463. Program Evaluation Measures for Substance Abuse Services**

Directs Department to establish standard program evaluation measures to assess effectiveness of programs provided through coordinating agencies and service providers in reducing and preventing incidence of substance abuse.

### **Sec. 464. Liquor License Fees**

Expresses legislative intent that revenue received by DCH from liquor license fees is to be expended at not less than the amount provided in FY 2006-07 for prevention, rehabilitation, care, and treatment of alcoholics pursuant to Liquor Control Code provisions.

### **Sec. 465. Respite Services**

Requires that funds appropriated for respite services be used for direct respite care services for children with serious emotional disturbances and their families. Specifies that no more than 1% of the funds allocated for respite services be expended by CMHSPs for administration and administrative purposes.

### **Sec. 467. Funding for Community Substance Abuse Prevention, Education, and Treatment Programs**

Requires DCH to increase funding paid from the Community Substance Abuse Prevention, Education, and Treatment Programs line item to coordinating agencies to the level provided in FY 2002-03, if funds become available.

### **Sec. 468. Incorporation of Coordinating Agencies into CMH Authorities**

Requires Department to recommend changes in its criteria for the incorporation of a city, county, or regional substance abuse coordinating agency into a local CMH authority. Permits Department to make accommodations or adjustments in formula distribution to coordinating agencies provided all of the following: funding not exceeding \$75,000 is provided to any coordinating agency for administrative costs incurred by incorporating into a CMH authority; accommodations or adjustments do not favor coordinating agencies who voluntarily elect to integrate with CMH authorities; and accommodations or adjustments do not negatively affect other coordinating agencies.

### **Sec. 470. Integration of Mental Health and Substance Abuse Services**

Specifies that DCH establish written expectations, such as coordination and consolidation of administrative functions, for CMHSPs, PIHPs, coordinating agencies, and counties on the integration of mental health and substance abuse services for those coordinating agencies that have voluntarily incorporated into CMH authorities and accepted funding from DCH for administrative costs incurred when incorporating into authorities.

## BOILERPLATE SECTION INFORMATION

### **Sec. 474. Guardianship of Recipients**

Requires Department to ensure that each contract with a CMHSP or PIHP requires the CMHSP or PIHP to provide each recipient and his/her family with information regarding the different types of guardianship. Expresses legislative intent that a CMHSP or PIHP does not attempt to reduce or restrict the ability of a recipient or his/her family from obtaining legal guardianship without just causes.

### **Sec. 476. Regional Jail Diversion Pilot Program**

Appropriates \$100 for a regional jail diversion pilot program that is located in a county with a population of more than 1,000,000 but not more than 1,750,000. Requires the program to incorporate a system of identification and diversion of mentally ill and dually-diagnosed individuals from the criminal justice system.

### **Sec. 477. Recovery Coaching Pilot Program**

Appropriates \$100 for the establishment of a recovery coaching pilot program to assist individuals who are current or former substance abusers.

### **Sec. 480. Atypical Antipsychotic Prescriptions**

Requires a report on the number and reimbursement cost of atypical antipsychotic prescriptions by each PIHP for Medicaid beneficiaries by March 30, 2008.

## **STATE PSYCHIATRIC HOSPITALS, CENTERS FOR PERSONS WITH DEVELOPMENTAL DISABILITIES, AND FORENSIC AND PRISON MENTAL HEALTH SERVICES**

### **Sec. 601. Third-Party Payments and Revenue Recapture Project**

Requires that priority be given to obtaining third-party payments for services in the funding of staff in the financial support division, reimbursement, billing, and collection services. Requires the collections from individual recipients of services to be handled in a sensitive and nonharassing manner. Requires Department to continue a revenue recapture project to generate additional third party revenue from cases that are closed or inactive.

### **Sec. 602. Gifts and Bequests**

Authorizes carry forward of unexpended and unencumbered funds up to \$1,000,000 from gifts and bequests for patient living and treatment environments for one fiscal year.

### **Sec. 603. Forensic Mental Health Services Provided to the Department of Corrections (DOC)**

Specifies that funds appropriated in Part 1 for Forensic Mental Health Services provided to DOC are in accordance with the interdepartmental plan developed in cooperation with DOC. Authorizes Department to receive and expend funds from DOC to fulfill obligations outlined in the interdepartmental agreement.

### **Sec. 604. Annual Reports for CMHSPs**

Requires CMHSPs or PIHPs to provide annual reports to DCH on the following: the number of days of care purchased from state hospitals, state centers, and private hospitals; the number and type of alternative placements to state hospitals and centers other than private hospitals; and waiting lists for placements in state hospitals and centers. Requires DCH to annually report the information to House and Senate Appropriations Subcommittees on Community Health, House and Senate Fiscal Agencies, and State Budget Director.

### **Sec. 605. Closures or Consolidations of State Hospitals and Centers**

Prohibits Department from implementing closures or consolidations of state hospitals, centers, and agencies until CMHSPs or PIHPs have programs and services in place for those persons currently in the facilities. Requires DCH to provide a closure plan four months after closure certification to House and Senate Appropriations Subcommittees on Community Health and State Budget Director. Requires transfer of remaining operational funds from closed state hospitals, centers, and agencies to CMHSPs or PIHPs responsible for providing services to these clients.

### **Sec. 606. Patient Reimbursement**

Allows Department to collect revenue for patient reimbursement from first/third party payers, including Medicaid and local county CMHSP payers, to cover cost of placement in state hospitals and centers. Authorizes DCH to adjust financing sources for patient reimbursement based on actual revenue earned. Permits carry forward of revenue collected that exceeds current year expenditures if approved by State Budget Director.

### **Sec. 607. Mandated Changes in the Operation of State Hospitals and Centers**

Requires the Department to ensure that mandated changes in the operation of state hospitals and centers are completed in a timely and efficient manner if Senate Bill 369 of the 94th Legislature, a bill amending the Mental Health Code as it relates to an individual's incompetence to stand trial and disposition of persons found not guilty by reason of insanity, is enacted into law.

## BOILERPLATE SECTION INFORMATION

### **Sec. 608. Privatization of Food and Custodial Services**

Requires the Department to evaluate the privatization of food and custodial services at state hospitals and centers and submit a copy of the evaluation by May 1, 2008 to the House and Senate Appropriations Subcommittees on Community Health, and House and Senate Fiscal Agencies.

### **PUBLIC HEALTH ADMINISTRATION**

#### **Sec. 650. Fish Consumption Advisory**

Requires the Department to communicate the annual public health consumption advisory for sport fish, at minimum to post the advisory on the Internet and provide it to participants of the Women, Infants, and Children special supplemental nutrition program.

#### **Sec. 651. Activities Pursuant to Healthy Michigan 2010 Report**

Requires a report by April 30, 2008 on activities and efforts of the Department to improve the health status of the citizens of the state pursuant to the goals and objectives stated in the "Healthy Michigan 2010" report, and to indicate measurable progress made.

### **HEALTH POLICY, REGULATION, AND PROFESSIONS**

#### **Sec. 704. Emergency Medical Services (EMS) Grantees and Contractors**

Requires Department to continue to work with EMS grantees funded from Part 1 appropriations to ensure that a sufficient number of qualified EMS personnel exist to serve rural areas of the state.

#### **Sec. 705. Internet Posting of Inspections of Nursing Homes**

Requires DCH to post executive summary of latest inspection for each licensed nursing home on the Internet.

#### **Sec. 706. Nursing Home Inspectors**

Requires DCH make every effort to hire nursing home inspectors with past experience in long-term care industry.

#### **Sec. 707. Nursing Scholarship Program**

Require funds appropriated for Nursing Scholarship Program be used to increase nurses practicing in Michigan. Requires Department and Board of Nursing work cooperatively with Michigan Higher Education Assistance Authority to coordinate scholarship assistance. Encourages Board of Nursing to structure scholarships in which recipients who intend to practice nursing in this state are rewarded.

#### **Sec. 708. Quarterly Staff Reports from Nursing Facilities**

Requires nursing facilities in their quarterly reports to DCH to report on the total patient care hours provided each month and the percentage of pool staff used each month during the preceding quarter. Requires DCH to make the quarterly staff report available to the public.

#### **Sec. 709. Michigan Essential Health Care Provider Program**

Allows funds appropriated for Michigan Essential Health Care Provider Program to be used to provide loan repayment for dentists that meet the criteria established in Part 27 of the Public Health Code.

#### **Sec. 710. Primary Care Services Funding for Health Centers**

Allocates up to \$2,172,700 to enhance the service capacity of federally qualified health centers and similar health clinics providing primary care services.

#### **Sec. 711. Customized Listings of Nonconfidential Information**

Allows Department to make customized listings of nonconfidential information in its possession, such as names and addresses of licensees, available to interested entities. Allows Department to establish and collect a reasonable charge for providing this service. Requires revenue received from this service be used to offset expenses for providing the service. Requires unexpended revenue balances to revert to the appropriate restricted fund.

#### **Sec. 712. Free Health Clinics**

Allocates \$250,000 to free health clinics, nonprofit organizations that use volunteer health professions to provide care to uninsured individuals, from funds appropriated for primary care services. Requires DCH to distribute funds equally to each free health clinic.

#### **Sec. 713. Funding for Multicultural Agencies Providing Primary Care Services**

Directs Department to continue to fund multicultural agencies that provide primary care services.

## BOILERPLATE SECTION INFORMATION

### **Sec. 714. Nursing Facility Complaint Investigations**

Requires DCH to report to the Legislature on the timeliness of nursing facility complaint investigations and the number of complaints that are substantiated on an annual basis. Requires DCH to make every effort to contact complainants during investigations.

### **Sec. 715. Nonurgent Medical Response Service**

Appropriates \$100 to the establishment of a pilot program in Detroit for a nonurgent medical response service.

### **Sec. 716. Investigations of Health Care Professionals**

Requires DCH to give priority in investigations of alleged wrongdoing by licensed health care professionals that are alleged to have occurred within 2 years of the initial complaint.

### **Sec. 717. HealthKey Program**

Allocates \$100 for the HealthKey Program for the uninsured.

## **INFECTIOUS DISEASE CONTROL**

### **Sec. 801. Priority for Adolescents for AIDS Prevention Services**

Requires Department and its subcontractors to ensure that high-risk children ages 9 through 18 receive priority for AIDS prevention, education, and outreach services.

### **Sec. 802. AIDS Provider Education**

Allows Department to provide funding to Michigan State Medical Society as lead agency for development and implementation of AIDS provider education activities.

### **Sec. 803. AIDS Drug Assistance Program**

Directs Department to continue AIDS Drug Assistance Program maintaining prior year eligibility criteria and drug formulary, without prohibiting Department from providing assistance for improved AIDS treatment medications. Allows Department to revise criteria and formulary, consistent with federal program guidelines, if appropriation is insufficient to maintain the prior year criteria and formulary.

### **Sec. 804. HIV and Hepatitis C Cooperative Program with Department of Corrections**

Directs Department to cooperate with Department of Corrections to share data and information regarding prisoners being released who are positive for HIV or the Hepatitis C antibody, related to the Michigan prisoner reentry initiative; and requires a report by April 1, 2008.

### **Sec. 806. Funding for Vaccines for Underinsured Children**

Permits allocation of up to \$100,000 for purchase of vaccines for underinsured children, if funds are available.

## **EPIDEMIOLOGY**

### **Sec. 851. Lead Abatement Program Report**

Directs Department to report annually on the expenditures and activities of the lead abatement program.

## **LOCAL HEALTH ADMINISTRATION AND GRANTS**

### **Sec. 901. Informed Consent Law Reimbursement of Local Costs**

Directs DCH to reimburse local health departments for costs incurred for certain services provided in accordance with the Informed Consent Law.

### **Sec. 902. Funding Penalty in Case of Dissolution of Multi-County Local Health Department**

Provides authority for Department to assess a penalty on a county of up to 6.25% of the county health department's local public health operations funding if that county ceases to be part of a district health department or an associated arrangement with other local health departments.

### **Sec. 904. Local Public Health Operations Allocations**

Directs that local public health operations line item funds shall be prospectively allocated to local public health departments to support costs for nine state and local cost-shared services. Certain of these services shall be provided in consultation with Michigan Departments of Agriculture, and Environmental Quality. Local public health departments will be held to contractual standards for these services. Local eligibility is contingent upon local spending of at least the amount expended in FY 1992-93 for these services. Requires that a report on planned allocations be made available by April 1, 2008.

## BOILERPLATE SECTION INFORMATION

### ***Sec. 905. Hearing and Vision Screening Services Allocation***

Allocates \$5.15 million of local public health operations line item funds to continue funding hearing and vision screening services through local public health departments.

### **CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION**

#### ***Sec. 1003. Alzheimer's Disease Information and Referral Services***

Allocates funds to regional networks to provide information and referral services for persons with Alzheimer's disease or related disorders, their families, and health care providers.

#### ***Sec. 1006. Priority for Smoking Prevention Funding and Allocation for Quit Kits***

Requires Department to give priority to prevention and smoking cessation programs for pregnant women, women with young children, and adolescents in spending smoking prevention program line item funds. Allocates \$900,000 of smoking prevention funds for the Quit Kit program that includes the nicotine patch or nicotine gum, for purposes of complying with 2004 PA 164.

#### ***Sec. 1007. Violence Prevention Program***

Directs that violence prevention line item funds be used for, but not limited to, programs aimed at preventing spouse, partner or child abuse and rape, and workplace violence; directs DCH to give equal consideration to public and private nonprofit grant applicants; DCH may provide funds to local school districts.

#### ***Sec. 1009. National Kidney Foundation of Michigan Funding***

Permits allocation of funds from the diabetes and kidney program line item to the National Kidney Foundation of Michigan for kidney disease prevention programs.

#### ***Sec. 1010. Osteoporosis Prevention and Education Funding***

Allocates \$200,000 of chronic disease prevention line item funds for osteoporosis prevention and treatment education programming.

#### ***Sec. 1019. Stroke Prevention Funding***

Allows Department to allocate \$50,000 of chronic disease prevention line item funds for stroke prevention, education, and outreach.

#### ***Sec. 1028. African-American Male Health Initiative Funding***

Allows Department to appropriate funds for the African-American Male Health Initiative if Healthy Michigan Funds or federal Preventive Health and Health Services Block Grant funds are available.

#### ***Sec. 1031. Pilot for Traumatic Brain Injury Treatment Guideline Model***

Appropriates \$100 of injury control intervention project line item funds to establish an incentive-based pilot program for level I and level II trauma hospitals to encourage utilization of an interactive, evidence-based treatment guideline model for traumatic brain injury, in a county with population of 175,000 - 200,000 persons.

### **FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES**

#### ***Sec. 1101. Reallocation of Funds for Certain Programs in Cases of Underexpenditures***

Requires Department to review basis for distribution of funds to local health departments and other agencies from various programs in Family, Maternal, and Children's Health Services appropriation unit and WIC program and indicate the basis on which any projected underexpenditures are to be reallocated to other local agencies that demonstrate need.

#### ***Sec. 1104. Department Report Regarding Certain Pregnancy Planning and Prenatal Programs***

Requires Department to: report by April 1, 2008 on planned allocations and prior fiscal year actual service and expenditure data for local maternal and child health services, prenatal care outreach and service delivery support, family planning local agreements, and pregnancy prevention programs; collect data to show distribution of funds between urban and rural and urban communities for future reporting; ensure that needs of rural communities are considered in distribution of funds for these programs; and defines "rural" as having population under 30,000.

#### ***Sec. 1105. Contract with Local Agencies Best Able to Serve Clients***

Requires Department to contract for services to be provided through the Family, Maternal, and Children's Health Services appropriation unit with local agencies best able to serve clients. Factors upon which to evaluate an agency's ability to serve clients are described; ability to provide access in rural communities is a new factor.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1106. Family Planning Title X Funding Compliance**

Requires that family planning programs receiving federal Title X funds be in compliance with federal performance and quality assurance indicators, and that those agencies not in compliance shall not receive supplemental or reallocated funds.

### **Sec. 1107. Prenatal Care Outreach Administrative Cost Limit**

Restricts local administrative, data processing, and evaluation costs to not more than 9% of the amount appropriated for prenatal care outreach and service delivery support.

### **Sec. 1108. Restrictions on Use of Pregnancy Prevention Funding**

Prohibits pregnancy prevention program appropriation line item funds from being used for abortion counseling, referrals, or services.

### **Sec. 1109. Volunteer Dental Services Program for the Uninsured**

Allocates funds from dental program line item to the Michigan Dental Association to administer a volunteer program of dental services to the uninsured; and requires a report by DCH to be made available upon request not later than December 1, 2007.

### **Sec. 1110. Designation of Delegate Agencies for Family Planning and Pregnancy Prevention Funds**

Provides that agencies currently receiving pregnancy prevention and family planning line item funds shall have the option of receiving those funds directly from DCH and be designated as delegate agencies.

### **Sec. 1111. Allocation of Funds for Direct Services for Family Planning and Pregnancy Prevention**

Directs Department to allocate no less than 88% of family planning and pregnancy prevention line item funds for the direct provision of services.

### **Sec. 1112. Allocation for Communities with High Infant Mortality Rates**

Requires the Department to allocate at least \$1,000,000 to communities with high infant mortality rates from the prenatal care outreach and service delivery support line item funds.

### **Sec. 1129. Report of Elevated Blood Lead Levels**

Requires DCH to annually report to the Legislature from information available to DCH on the number of children with elevated blood lead levels, by county, indicating blood lead level and sources of information.

### **Sec. 1132. Nurse Family Partnership Program Allocation**

Allocates \$400,000 to the Nurse Family Partnership Program from the special projects appropriation line item.

### **Sec. 1133. Infant Mortality Data Release**

Requires Department to release infant mortality rate data to all local public health departments 72 hours or more prior to releasing infant mortality rate data to the public.

### **Sec. 1135. School Health Education Curriculum**

Establishes that provision of a school health education curriculum shall be in accordance with health education goals of the Michigan Model for Comprehensive School Health Education State Steering Committee; establishes steering committee membership; requires curriculum materials be made available upon request.

## **WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM**

### **Sec. 1151. Farmer's Market Nutrition Program Local Contributions**

Allows Department to work with local participating agencies to define local annual contributions for the Farmer's Market Nutrition Program, to enable DCH to request federal matching funds based on local commitment of funds.

### **Sec. 1152. Lead Testing for Children in WIC Program**

Department shall require that all Medicaid children participating in the Special Supplemental Food Program for Women, Infants, and Children receive lead screening testing.

### **Sec. 1153. WIC Program Access in Rural Communities**

Requires the Department to ensure that individuals residing in rural communities have sufficient access to the services offered through the Women, Infants, and Children Food and Nutrition Program.

## **CHILDREN'S SPECIAL HEALTH CARE SERVICES**

### **Sec. 1201. Medical Care and Treatment Reimbursement Policies**

Requires payments for medical care and treatment be made consistent with reimbursement policies of Michigan medical services program.

## BOILERPLATE SECTION INFORMATION

### ***Sec. 1202. Children's Special Health Care Services Coverage***

Allows the Children's Special Health Care Services program to provide special formula for persons with certain metabolic and allergic disorders, treatment to persons age 21 or older with cystic fibrosis, genetic diagnostic and counseling services, and services to persons age 21 or older with hemophilia.

### ***Sec. 1203. Referrals to Locally-Based Services Programs***

Requires that Department refer clients of the program to the locally-based services program in their community.

### **OFFICE OF DRUG CONTROL POLICY**

#### ***Sec. 1250. Interdepartmental Grant to Judiciary for Drug Treatment Courts***

Requires the Department to provide \$1.8 million of federal Byrne grant program funding to the Judicial Branch as an interdepartmental grant, for local drug treatment courts.

### **CRIME VICTIM SERVICES COMMISSION**

#### ***Sec. 1302. Allocation of Funds for Forensic Nurse Examiner Programs***

Allocates up to \$50,000 of justice assistance grants line item funds for expansion of forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. Unexpended funds shall be carried forward.

#### ***Sec. 1304. Sexual Assault Evidence Collection Procedures***

Requires Department to work with Department of State Police and certain statewide organizations to ensure that recommended standard procedures for emergency treatment of sexual assault victims are followed in the collection of evidence in cases of sexual assault.

### **OFFICE OF SERVICES TO THE AGING**

#### ***Sec. 1401. Eligibility for Certain Senior Program Funding***

Provides that funding for community, nutrition, and home services be restricted to eligible individuals at least 60 years of age who fail to qualify for home care services under Titles XVIII, XIX, or XX of the Social Security Act.

#### ***Sec. 1403. Home-Delivered Meals Waiting Lists***

Requires area agency on aging regions to report home-delivered meals waiting lists to the Office of Services to the Aging, and establishes standard criteria for persons to be included on the waiting list including an initial determination of likely to be eligible.

#### ***Sec. 1404. Authorization for Fees for Senior Day Care, Care Management, Respite Care***

Allows area agencies on aging and local providers to receive and expend fees for the provision of day care, care management, respite care, and certain eligible home and community-based services. Fees shall be based on a sliding scale, taking client income into consideration, and shall be used to expand services.

#### ***Sec. 1406. Allocation of Respite Care Tobacco Settlement Funds for Direct Care***

Requires that the \$5.0 million respite care appropriation of Merit Award Trust Fund monies be used only for direct respite care or adult respite care center services, and be allocated according to a long-term care plan. Not more than 9% of the allocation shall be expended for administrative purposes.

#### ***Sec. 1413. Support of Locally-Based Community Senior Services and Area Agency Member Change***

Establishes legislative support of locally-based services, support of local counties in their approval of area agency on aging plans, notice and conditions for local change of membership of area agencies on aging in a region, and legislative intent to prohibit area agencies on aging from providing direct services, other than access services, unless a waiver has been received from Office of Services to the Aging.

#### ***Sec. 1416. Support for In-Home Services for Non-Medicaid Seniors***

Establishes legislative commitment to provide in-home services, resources, and assistance for the frail elderly who are not being served by the Medicaid home- and community-based services waiver program.

#### ***Sec. 1417. Area Agency on Aging Reporting of Expenditures***

Requires the Department to report by March 30, 2008 on allocations of state resources by administration and program to each area agency on aging, and detail of expenditures by each area agency on aging of all state and local funds by program and administration.

## BOILERPLATE SECTION INFORMATION

### **MICHIGAN FIRST HEALTHCARE PLAN**

#### ***Sec. 1501. Michigan First Healthcare Plan Funding Contingency***

Requires that funding for the Michigan First Healthcare Plan is contingent on approval of a waiver from the federal government and in addition to those funds appropriated in part 1 up to \$300.0 million additional federal authorization shall be appropriated contingent upon approval of a waiver from the federal government.

#### ***Sec. 1502. Michigan First Healthcare Plan Provider Determination***

Requires the Department to provide a report detailing the process used to determine which insurance entities will be selected for participation in the Michigan First Healthcare Plan and that a single source contract shall not be awarded to a health plan through the Michigan First Healthcare Plan.

#### ***Sec. 1503. Provide Copy of Federal Approval of Plan/Proposal Prior to Implementation***

Requires the Department to provide a copy of the federally approved Michigan First Healthcare Plan or similar proposal at least 60 days before implementing any portion of the plan, or proposal.

### **MEDICAL SERVICES**

#### ***Sec. 1601. Remedial Services Costs and Medicaid Eligibility***

Requires remedial service costs to be used in determining medically-needy eligibility for those in adult foster care and homes for the aged.

#### ***Sec. 1602. Medicaid Eligibility for the Elderly and Disabled***

Provides Medicaid eligibility to low income elderly and disabled persons up to 100% of the poverty level.

#### ***Sec. 1603. Medical Services Buy-In Program***

Allows Department to establish a statewide program for persons to purchase medical coverage at a rate determined by DCH.

#### ***Sec. 1604. Medicaid Eligibility Application***

Specifies certain conditions of the Medicaid eligibility application process.

#### ***Sec. 1605. Medicaid Protected Income Level***

Establishes the Medicaid protected income level at 100% of the public assistance standard and requires 90-day notice prior to implementation of changes in the protected income level.

#### ***Sec. 1606. Medicaid Eligibility Deduction for Guardian and Conservator Charges***

Limits the allowable deduction for guardian and conservator charges to \$60 per month when determining Medicaid eligibility and patient pay amounts.

#### ***Sec. 1607. Medicaid Presumptive Eligibility for Pregnant Women***

Stipulates that Medicaid applicants whose qualifying condition is pregnancy shall be presumed to be eligible unless the preponderance of evidence in the application indicates otherwise. Sets procedures to facilitate access to health care for pregnant women including provision of an authorization letter, a listing of Medicaid physicians and health plans, referral to public health clinics for ineligible persons, and allowing qualified applicants to select or remain with the participating obstetrician of her choice. Specifies that obstetrical and prenatal care claims are to be paid at Medicaid fee-for-service rates if there is no contract between provider and managed care plan.

#### ***Sec. 1610. Provider Cost Report Grievance Procedure***

Requires Department to provide a cost report grievance process for medical providers and payment within nine months following submission of cost reports.

#### ***Sec. 1611. Medicaid Payment in Full Provisions***

Requires Medicaid payment rate to be accepted as payment in full, including payments from other third-party sources. Hospital services payments for persons dually eligible for Medicare and Medicaid are to include capital payments in determining Medicaid reimbursement amount.

#### ***Sec. 1620. Pharmacy Dispensing Fee and Prescription Drug Copayments***

Establishes the pharmacy dispensing fee at \$2.50 (\$2.75 for nursing home pharmacies) or the pharmacy's usual and customary charge, whichever is less. Specifies prescription copayments for Medicaid recipients of \$1.00 for a generic drug and \$3.00 for a brand-name drug except as prohibited by federal or state law or regulation. Includes intent language that if the department realizes savings resulting from the way in which the Medicaid program pays pharmacists for prescriptions from average wholesale price to average manufacturer price the savings shall be returned to pharmacies as an increase in the dispensing fee. The fee increase can be no greater than \$2.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1621. Drug Utilization Review and Disease Management**

Authorizes drug utilization review and disease management systems with physician oversight and consultation with various medical provider groups.

### **Sec. 1623. Dispensing of Maintenance Drugs**

Continues current Medicaid policy that allows for the dispensing of a 100-day supply for maintenance drugs and notice to medical providers regarding this policy. Requires dispensing medication in the quantity prescribed unless subsequent consultation with the physician indicates otherwise.

### **Sec. 1625. Atypical Antipsychotic Medications**

Directs Department to continue placing all atypical antipsychotic medications on the Medicaid preferred drug list.

### **Sec. 1627. Drug Rebates for the State Medical Program and CSHCS Program**

Authorizes Department to secure manufacturer drug rebates for participants in MIChild, MOMS, State Medical, Children's Special Health Care Services, and Adult Benefit Waiver programs that are equivalent to Medicaid rebates, and allows for preauthorization of drugs if rebates are not provided.

### **Sec. 1629. Maximum Allowable Cost (MAC) Drug Pricing**

Requires DCH to base its MAC prices for generic drugs on pricing available from at least two wholesalers who deliver in Michigan.

### **Sec. 1630. Medicaid Podiatric, Dental and Chiropractic Services**

Continues podiatric, adult dental and chiropractic services at not less than the level in effect on October 1, 2002. Prohibits restrictions on chiropractic services unless the recipient exceeds 18 visits within a year. Authorizes Department to implement bulk order purchasing of hearing aids, imposes limits on binaural hearing aid benefits and limits replacement of hearing aids to once every three years.

### **Sec. 1631. Medical Services Copayments**

Requires copayments on dental, podiatric, chiropractic, vision, and hearing aid services unless prohibited by law or regulation. Specifies copayments of \$2 for a physician office visit, \$3 for a hospital emergency room visit, \$50 for the first day of an in-patient hospital stay and \$1 for an out-patient hospital visit.

### **Sec. 1633. Healthy Kids Dental Program Expansion**

Requires DCH to expand Healthy Kids Dental program to Genesee County and Saginaw County with an additional \$2,625,300 in funding.

### **Sec. 1634. Continuation of Ambulance Services Rate Increases**

Requires continuation of FY 2000-01 5% increase in ambulance service payment rates and continuation of the FY 2005-06 ambulance mileage reimbursement rate increase of \$4.25 per mile.

### **Sec. 1635. Continuation of Medicaid Obstetrical Rate Increase**

Requires continuation of FY 2005-06 allocation of \$6,910,800 between Physician Services and Health Plan Services appropriation lines for the increase of Medicaid reimbursement rates for obstetrical services.

### **Sec. 1636. Continuation of Medicaid Physician Well Child and Primary Care Procedures Rate Increase**

Requires continuation of FY 2006-07 allocation of \$23,874,800 between Physician Services and Health Plan Services appropriation lines for an increase in Medicaid reimbursement rates for physician well child procedure codes and primary care procedure codes.

### **Sec. 1637. Personal Health Responsibility Agreement**

Requires that all Medicaid recipients be offered the opportunity to sign a Medicaid personal responsibility agreement which contains various provisions regarding healthy behaviors.

### **Sec. 1641. Institutional Provider Costs Reports**

Requires institutional providers to submit their cost reports within five months of the end of the fiscal year.

### **Sec. 1643. Psychiatric Residency Training Program**

Allocates \$10,359,600 from Graduate Medical Education funds for a psychiatric residency training program if the universities involved provide the necessary allowable Medicaid matching funds.

### **Sec. 1647. Continuation of Graduate Medical Education Payments**

Requires graduate medical education payments to hospitals at no less than the level of rates and payments in effect on April 1, 2005.

## BOILERPLATE SECTION INFORMATION

**Sec. 1648. Automated Toll-Free Phone Line and Online Eligibility Verification**

Requires Department to maintain automated toll-free phone line and make available an online resource for medical providers to obtain enrollment and benefit information of Medicaid recipients.

**Sec. 1649. Breast and Cervical Cancer Treatment Coverage**

Directs Department to establish breast and cervical cancer treatment coverage for uninsured women under age 65 and with incomes below 250% of the poverty level, pursuant to federal legislation.

**Sec. 1650. Mandatory Managed Care Enrollment Requirement**

Authorizes continuation of Medicaid managed care and assignment of recipients who do not select a provider. Requires notice of exception criteria to enrollment, the right to change plans, and complaint/grievance procedures. Specifies criteria for medical exceptions to mandatory managed care enrollment.

**Sec. 1651. Hospice Services Under Medicaid Managed Care**

Allows access to hospice services for Medicaid patients enrolled in health maintenance organizations.

**Sec. 1652. Health Plan Service Area Expansion**

If the Department implements changes allowing HMOs to request service area expansions, the HMOs must agree to: (1) not sell or transfer any portion of the HMO's assets or business for a period of three years, and (2) the HMO that expands into a county with a population of at least 1,500,000 shall also expand its coverage to a county with a population of less than 100,000 which has one or fewer HMOs participating in the Medicaid program.

**Sec. 1653. Conditions for Implementation of Medicaid Managed Care Plans**

Establishes conditions for implementing Medicaid managed care plans related to continuity of care, submitting HMO data for evaluation, health plan advisory council, and choice of plans and prohibits mandatory enrollment in non-metropolitan areas with only one HMO unless there is a choice of two or more physicians. Maintains voluntary enrollment in Children's Special Health Care Plan, and requires a budget neutral case rate adjustment for persons with AIDS and other high-cost conditions.

**Sec. 1654. Reimbursement for HMO Covered Services**

Requires Medicaid HMOs to pay for services by non-HMO providers if medically necessary, approved by the HMO, immediately required, and cannot be obtained through HMO providers on a timely basis. Services are considered approved if the authorization request is not responded to within 24 hours.

**Sec. 1655. Twelve-Month Lock-In for HMO Enrollment**

Allows for a 12-month lock-in to HMOs with good cause exceptions and allows recipients to change plans for any reason within the first 90 days.

**Sec. 1656. HMO Expedited Complaint Review Procedures**

Requires expedited grievance procedure for Medicaid recipients enrolled in qualified health plans and a toll free phone number to help resolve problems and complaints.

**Sec. 1657. HMO Reimbursement for Hospital ER Service, HMO Solvency Standards and Medicaid ER Financial Incentives**

Requires reimbursement for emergency room services to screen and stabilize a patient without prior authorization by an HMO, and notice to the HMO regarding a patient's diagnosis and treatment within 24 hours of discharge; prior authorization by the HMO is required for further services beyond stabilization. Requires DCH to receive assurances from Office of Financial and Insurance Services that new Medicaid HMOS meet net worth and solvency standards prior to contracting with them. Requires a report by September 30, 2008 on how payment policies in the current Medicaid program create financial incentives for health facilities to admit recipients from the emergency room.

**Sec. 1658. HMO Contracts with Hospitals**

Requires that HMOs shall have contracts with local hospitals; requires reimbursement to non-contracted hospitals at Medicaid fee-for-service rates; requires hospitals that do not contract with HMOs in their service area enter into a hospital access agreement as specified in a MSA policy bulletin.

**Sec. 1659. Applicable Boilerplate Sections for Medicaid Managed Care**

Specifies the Medical Services boilerplate sections that apply to Medicaid managed care programs.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1660. Access to EPSDT, Well Child, and Maternal and Infant Support Services**

Requires timely access to EPSDT services for children enrolled in Medicaid managed care programs; specifies primary care provider's responsibility to assure child's vision/hearing screening; requires local health departments provide preschool vision/hearing screenings and accept referrals; requires that HMOs provide EPSDT utilization data, well child visits, and maternal and infant support services as described in Medicaid policy; requires DCH to provide budget neutral incentives to improve performance related to care of children and pregnant women.

### **Sec. 1661. Prohibition on Prior Authorization for EPSDT and MSS/ISS Services**

Requires timely access to Maternal/Infant Support services (MSS/ISS) and coordination with other state or local programs; prohibits prior authorization for EPSDT and MSS/ISS screening referrals and up to three MSS/ISS service visits.

### **Sec. 1662. Review and Analysis of HMO Performance, EPSDT and MSS/ISS Technical Assistance**

Directs DCH to assure that an external quality review of each HMO is performed that results in an analysis and evaluation of aggregated information on quality, timeliness, and access to health care services either contracted or directly provided to Medicaid beneficiaries; directs DCH to submit copies of the analysis of HMO HEDIS reports and annual external quality review report within 30 days; requires DCH to work with Michigan Association of Health Plans and Michigan Association for Local Public Health to improve EPSDT and MSS/ISS services, and assure that training and technical assistance are available for EPSDT and MSS/ISS.

### **Sec. 1666. System Changes Providing Timelier Inclusion of Newborns in Medicaid Eligibility File**

Directs DCH to implement system changes to assure that within 30 days of birth newborns of health plan covered Medicaid mothers are included in Medicaid eligibility file and enrolled in the same health plan as the mother.

### **Sec. 1670. MICHild Program Eligibility**

Specifies that funds appropriated for MICHild Program are to be used to provide health care to children under age 19 in families with income below 200% of federal poverty level who have not had health insurance within six months of making application for MICHild benefits. Allows DCH to provide up to one year of continuous eligibility for MICHild program unless family members no longer meet eligibility criteria or family fails to pay the monthly premium. Assures continuity of care for persons whose category of MICHild eligibility changes due to family income. Specifies income level and verification requirements to be used to determine eligibility for MICHild program. Requires DCH to contract with any qualified HMO, dental care corporation, health care corporation or other entity which offers to provide MICHild health care benefit at the capitated rate. Allows DCH to obtain certain MICHild services contractually through community mental health agencies.

### **Sec. 1671. MICHild Marketing and Outreach**

Requires Department to continue a comprehensive approach to marketing and outreach of the MICHild program, and to coordinate such efforts with Department's existing outreach and marketing activities.

### **Sec. 1673. MICHild Premiums and Prohibition on MICHild Copayments**

Allows Department to establish premiums for eligible persons above 150% of poverty level from \$10 to \$15 per month for a family.

### **Sec. 1677. MICHild Benefits**

Specifies the benefits to be covered by the MICHild program based on the state employee insurance plan.

### **Sec. 1680. Nursing Home Wage Pass-Through**

Requires that previous payment increases for enhanced wages and new or enhanced employee benefits provided in previous years through Medicaid nursing home wage pass-through program be continued.

### **Sec. 1681. Home and Community-Based Services**

Requires the Department and local waiver agents to encourage the use of family members, friends, and neighbors to provide non-medical home and community-based services, where appropriate.

### **Sec. 1682. OBRA Nursing Home Enforcement Provisions**

Authorizes DCH to implement federal nursing home enforcement provisions and receive/expend noncompliance penalty money, and is authorized to provide funds to; the Disability Network of Michigan to be distributed to the 15 Centers for Independent Living for the purpose of assisting individuals with disabilities who reside in nursing homes to return to their homes; conduct a survey of residents, their families and employees, evaluating nursing home consumer satisfaction and quality of care.

## BOILERPLATE SECTION INFORMATION

**Sec. 1683. Dignity and Rights of Terminally Ill and Chronically Ill Patients**

Requires Department to promote activities that preserve the dignity and rights of terminally ill and chronically ill individuals, including hospice care, pain management, and suicide prevention.

**Sec. 1684. Home and Community-Based Services (HCBS) Administrative Expenses**

Requires the continuation of the FY 2005-06 HCBS waiver program payment rate for administrative expenses are reduced by \$2.00 per person per day, and savings be reallocated to increase enrollment in waiver program.

**Sec. 1685. Prospective Setting of Medicaid Nursing Home Payment Rates**

Requires Medicaid nursing home payment rates to be set 30 days in advance of the facility's fiscal year, and to be based on the most recent cost report submitted.

**Sec. 1686. Long-Term Care Single Point of Entry Pilot Project**

Requires Department to report by April 30, 2008, on the progress of four Medicaid long-term care single point of entry services pilot projects and expresses legislative intent that funding end for the single point of entry program on September 30, 2009.

**Sec. 1688. Personal Care Services Reimbursement Rate**

Prohibits a limit on personal care services reimbursement under Medicaid Home and Community-Based Services program, but allows DCH to maintain aggregate per day client reimbursement cap for all services provided under the waiver program.

**Sec. 1689. Home and Community-Based Services**

Gives priority in HCBS enrollment to nursing homes residents and those eligible for nursing homes, and requires screening to prevent unnecessary nursing home admissions. Requires a quarterly report on HCBS allocations and expenditures by regions, net cost savings by moving individuals from nursing home to the HCBS program, number of individuals transitioned, number of individuals on the waiting list by region, the amount of funds transferred during the quarter, number of individuals served and the number of days of care for the HCBS program and in nursing homes.

**Sec. 1691. Adult Home Help Worker Wage Increase**

Provides that all adult home help workers receive a wage of at least \$7.50 per hour effective April 1, 2008.

**Sec. 1692. Medicaid School-Based Services**

Provides authorization for Medicaid reimbursement of school-based services.

**Sec. 1693. Special Medicaid Reimbursement Payments Increase**

Allows for an increase in Special Medicaid Reimbursement payments if a Medicaid state plan amendment for such payments above the appropriated level is submitted.

**Sec. 1694. Allocation to Children's Hospitals**

Authorizes distribution of funds to children's hospitals with high indigent care volume for poison control services.

**Sec. 1695. Nursing Facility Case Mix Reimbursement**

Requires the Department to evaluate the impact of implementing a case mix reimbursement system for nursing facilities. The Department is to consult with the Health Care Association of Michigan, the Michigan County Medical Care Facilities Council and the Association of Homes and Services for the Aging, with a progress report due by August 1, 2008.

**Sec. 1697. Local Match Funds for School-Based or School-Linked Services**

Allows Department to utilize school district funds received from a health system as state match for federal Medicaid or State Children's Health Insurance Program funds to be used for new school-based or school-linked services.

**Sec. 1699. Disproportionate Share and Graduate Medical Education (GME) Payments**

Authorizes separate payments for hospitals serving a disproportionate share of indigent patients in the amount of \$50.0 million and those hospitals providing GME training programs.

**Sec. 1710. MIChoice Home and Community-Based Services**

Requires DCH to report proposed changes in MIChoice home and community-based services waiver program screening process to House and Senate Appropriations Subcommittees on Community Health 30 days prior to implementation.

## BOILERPLATE SECTION INFORMATION

**Sec. 1711. Medicaid Two-Tier Case Rate for Emergency Services and Emergency Room Observation Rate**

Requires continuation of a two-tier Medicaid case rate for emergency physician charges, and that payments by case and aggregate not exceed 70% of Medicare rates.

**Sec. 1712. Rural Health Initiative**

Subject to availability of funds, requires DCH to implement a rural health initiative with funds to be first allocated to a rural outpatient hospital adjutor, and secondly, for defibrillator grants, EMT training, or other similar programs.

**Sec. 1716. Adult Benefits Waiver Enrollment Level**

Requires Department to seek to maintain a constant enrollment level within the Medicaid Adult Benefits Waiver program through FY 2007-08.

**Sec. 1717. Disproportionate Share Payments to Hospitals (DSH)**

Requires the Department to create two pools for the distribution of DSH funds; first pool would distribute \$45.0 million based on methodology in FY 2003-04; remaining \$5.0 million would be allocated to nonpublic unaffiliated hospitals that received less than \$900,000 in DSH payments in FY 2003-04 based on each hospital's Medicaid revenue and utilization, with no payments being made less than \$1,000. A distribution report is due by September 30, 2008.

**Sec. 1718. Adult Home Help Review Process**

Authorizes Medicaid adult home help beneficiaries to request a departmental review of any decisions that may adversely affect their access to home help services.

**Sec. 1720. Medicare Recovery Program**

Directs Department to continue its Medicare recovery program.

**Sec. 1721. Medicaid Financial Eligibility For Long-Term Care Patients**

Requires review of Medicaid eligibility requirements for long-term care patients related to prepaid funds that are subsequently returned to individuals who qualify for Medicaid.

**Sec. 1722. Medicaid Disproportionate Share Payment**

Specifies DSH payment amount to be paid to Hutzel Hospital.

**Sec. 1724. Injectable Drugs for Respiratory Syncytial Virus**

Directs DCH to allow pharmacies to purchase injectable drugs for treatment of respiratory syncytial virus for shipment to physician's offices; allows Medicaid reimbursement for dispensing and administration if patients are eligible.

**Sec. 1725. Medicaid Eligibility Error Rate Reduction**

Requires Department to continue to work with the Department of Human Services to reduce Medicaid eligibility errors related to basic eligibility requirements.

**Sec. 1728. Lifting and Transferring Devices for Medicaid Recipients**

Requires Department to make available to Medicaid recipients, not based on Medicare guidelines, freestanding, electric, lifting and transferring devices.

**Sec. 1731. Medicaid Asset Test**

Requires Department to continue Medicaid eligibility asset test for optional parents/caretaker relatives and 19 and 20 year olds. Pending federal approval, coverage is excluded for 19 and 20 year olds whose parent or legal guardian has health care coverage or access to health coverage.

**Sec. 1732. Nursing Home QAAP Modification Assurance**

Assures that nursing home reimbursement rates will not be reduced to achieve GF/GP savings if proposed modifications to the quality assurance assessment program for nursing homes are not implemented.

**Sec. 1733. Federal Funds for Electronic Prescribing and Health Information Technology Initiatives**

Requires the Department to seek federal funds to permit the state to provide financial support for electronic prescribing and other health information technology initiatives.

**Sec. 1734. Medicaid Recipients Healthy Behavior Incentive Program**

Requires the Department to seek federal funds that will permit the state to provide financial incentives for positive health behavior practiced by Medicaid recipients.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1735. Durable Medical Equipment Contract Savings**

Requires the Department to establish a committee to identify possible Medicaid program savings associated with the creation of a preferred provider program or an alternative program for durable medical equipment; to involve providers who can offer a broad statewide network of services and who are accredited by the Joint Commission On Accreditation of Healthcare Organizations or the Accreditation Commission for Health Care, Inc.; identifies organizations which will have representation on the committee; requires a report on anticipated savings from contracting opportunities; and requires notification within 30 days of implementation of any proposed Medicaid policy changes for durable medical equipment.

### **Sec. 1739. Health Plan Outcome Target Bonus Payments**

Requires the Department to continue to establish medical outcome targets for the 10 most prevalent and costly ailments affecting Medicaid recipients, making bonus payments available to Medicaid HMOs that meet these outcome targets independent of HMO rate adjustments utilized in FY 2005-06.

### **Sec. 1740. Graduate Medical Education Funds Distribution**

Requires assurance from the Department that all GME funds are promptly distributed to hospitals using a methodology developed in consultation with the graduate medical education advisory group and mandates the representation of the advisory group.

### **Sec. 1741. Nursing Home Interim Payments**

Requires the Department to continue to provide nursing homes the opportunity to receive interim payments upon their request and that that these payments are as similar to expected cost-settled payments as possible.

### **Sec. 1742. Hurley Medical Center Special Financing**

Requires the Department to allow the retention of \$1,000,000.00 in special Medicaid reimbursement funding by any public hospital that meets certain criteria. Only Hurley Medical Center meets the criteria.

### **Sec. 1747. Adult Home Help Service Coordination**

Conditions that reimbursement for adult home help services requires that the matching of adult home help providers with service recipients be coordinated by the local county Department of Human Services offices.

### **Sec. 1749. Standard Billing Formats for Health Plans**

Mandates that the Department shall require all Medicaid health plans to use the same standard billing formats starting September 30, 2007.

### **Sec. 1752. Sharing of Third Party Liability Information With Health Plans**

Requires the Department to provide Medicaid health plans with any information that may assist the health plan in determining whether another party may be responsible for the payment of health care benefits.

### **Sec. 1756. Medical Management of High Cost Medicaid Beneficiaries**

Requires the Department to establish and implement a specialized case and care management program to serve the most costly Medicaid beneficiaries who are not enrolled in a health plan and are noncompliant with medical management. The case and care management program shall provide a performance payment incentive for physicians, it may include contractual arrangements with Medicaid HMOs for the provision of specialized case management services, and the contracts may require collection of data related to Medicaid recipient compliance.

### **Sec. 1757. Medicaid Applicants Proving Legal Residence**

Requires the Department to direct the Department of Human Services to require Medicaid applicants to prove that they are residing legally in the United States.

### **Sec. 1758. Emergency Services Only Medicaid Benefit Eligibles**

Requires the Department to provide a report by April 1, 2008, on the number of individuals who receive the emergency services only Medicaid benefit and the annual amount of expenditures on this population.

### **Sec. 1759. Federal Deficit Reduction Act Policy Changes**

Requires the Department to implement certain policy changes included in the Federal Deficit Reduction Act of 2005. They are: lengthening the look back policy for asset transfers, changing the penalty period to begin the day an individual applies for Medicaid, including a home equity threshold for Medicaid eligibility, to utilize Michigan's Medicaid False Claims Act to collect fraudulent Medicaid claims.

## BOILERPLATE SECTION INFORMATION

**Sec. 1761. Hospital QAAP Distribution of Payments Exceeding Upper Payment Limit**

Requires the Department to distribute Medicaid access to care initiative payments (MACI) that exceed hospitals upper payment limits to hospitals that meet certain conditions, most likely rural hospitals.

**Sec. 1763. Medication History Information Exchange**

Requires the Medicaid health plans in Southeast Michigan to participate in a medication history information exchange pilot project.

**Sec. 1764. Actuarial Soundness Certification of Medicaid Health Plan Rates**

Requires the Department to annually certify that rates paid to Medicaid health plans are actuarially sound and to notify the House of Representatives, the Senate, and the fiscal agencies immediately upon rate certification and approval.

**Sec. 1767. Pharmacist Payment Report**

Requires the Department to evaluate and produce a report on the impact of the change in which the Medicaid program pays pharmacists for prescriptions from average wholesale price to average manufacturer price.

**Sec. 1770. Quarterly Medicaid Policy Changes**

Specifies that DCH shall attempt to make adjustments to the Medicaid provider manual and effective dates for proposed Medicaid policy bulletins on October 1, January 1, April 1, or July 1 after the end of the consultation period.

**Sec. 1772. Enrollment of Foster Care Children in HMOs**

Requires the Department to establish a program on or before July 1, 2008 which would enroll all foster care children in Michigan into a Medicaid HMO.

**Sec. 1773. Nonemergency Transportation Services**

Directs the Department to establish and implement a bid process to identify a single private contractor to provide Medicaid covered nonemergency transportation services in each county with a population over 750,000.

**Sec. 1774. Money Follows the Person Grant Reporting**

Requires the Department to provide a report on expenditures, estimated general fund savings and numbers of people receiving services supported by federal Money Follows the Person revenue.

**Sec. 1775. Medicaid Managed Long-Term Care Study**

Requires the Department to conduct a study and publish a report regarding the feasibility of providing long-term care services through managed care.

**Sec. 1776. Outpatient Prospective Payment System (OPPS) Methodology**

If the OPPS reimbursement methodology is continued, the applied Medicaid reduction factor must be revenue neutral and actuarially sound.

**Sec. 1777. Nursing Home Dining Assistants**

Requires the Department to permit nursing homes to use dining assistants to feed eligible residents, in accordance with federal and state law. The Department will not be responsible for training costs.

**Sec. 1778. Rural Hospital Disproportionate Share Hospital (DSH) Payments**

Requires the Department, with the Michigan Health and Hospital Association, to implement \$50.0 million of DSH payments that focuses on small and rural hospitals and \$10.0 million to hospital facilities with neonatal intensive care units and pediatric intensive care units. The payment methodology will be shared 30 days prior to submission of the plan to the federal government.

**Sec. 1780. Primary Care Physician and Hospital Neonatal and Pediatric ICU Contingent Rate Increase**

Contingent on an increase in FY 2007-08 of Michigan's federal medical assistance percentage (FMAP) it is the intent of the Legislature that a portion of the increase be used to augment physician primary care code fee screens, and hospital neo-natal and pediatric intensive care unit payments.

**Sec. 1781. Pilot Projects Demonstrating Improvements In Efficiency and Effectiveness**

Allows the Department to conduct pilot projects to demonstrate improvements in efficiency and effectiveness of identified programs. Allows direct access to DHS eligibility, budget and registration systems to accomplish pilot project objectives.



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